(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

iliterial neverue Service		
Submission Identification Number (SID)		
Taxpayer's name	Social security number	
GOWRISHANKAR MUTHU	676-47-6234	
Spouse's name	Spouse's social security number	
PRIYANKA RAJARATHINAM	861-29-8905	
Part I Tax Return Information — Tax Year Ending December 31, 2023	3 (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		
2 Total tax		
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		
4 Amount you want refunded to you	 	95.
5 Amount you owe		
Part II Taxpayer Declaration and Signature Authorization (Be sure you go Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or a		
return (original or amended) I am now authorizing. I consent to allow my intermediate service provide to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reast for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I author Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution acc payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financia authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancella business days prior to the payment (settlement) date. I also authorize the financial institutions involv taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or ame Electronic Funds Withdrawal Consent.	con for rejection of the transmission, (b) the re- rize the U.S. Treasury and its designated Fina- count indicated in the tax preparation softwar all institution to debit the entry to this account, terminate the authorization. To revoke (candiation requests must be received no later the ved in the processing of the electronic paymed to the payment. I further acknowledge that	eason ancial re for This cel) a cent of at the
Taxpayer's PIN: check one box only	7 6 2 3 4	
X I authorize GLOBAL TAXES LLC to enter or g	Enter five digits, but	s my
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN and your return is filed using the Practitioner F below.		
Your signature ►	Date ▶	
Spouse's PIN: check one box only		
· _	generate my PIN 9 8 9 0 5 as	my
ERO firm name	Enter five digits, but	,
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 if you are entering your own PIN and your return is filed using the Practitioner P below.		
Spouse's signature ▶ □	Date ►	
Practitioner PIN Method Returns Only—continue	e below	
Part III Certification and Authentication — Practitioner PIN Method Only		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Prov	am submitting this return in accordance wit	
ERO's signature ►	Date ▶	
FRO Must Patain This Form — Saa Instruct	tions	

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

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

£1040		artment of the Treasury-Internal Revenue Servi		ırn 🥳	202	3	OMB No. 1545	-0074	IRS Use	Only-	·Do not w	rite or sta	ple in this space	e.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		· ·	, 2023, end	ing			, 20		See sep	oarate i	nstructions.	
Your first name	and m	iddle initial	Last nan	ne						,	Your so	cial sec	urity number	r
GOWRISH	ANKA:	R	MUTH	U							676	47	6234	
		s first name and middle initial	Last nan								Spouse's		security num	nber
PRIYANKA	A		RAJAI	RATHINA	AM						861	29	8905	
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ns.				A	Apt. no.		Preside	ntial Ele	ction Campa	aign
2610 EAS	STWI	ND CIRCLE											ou, or your	
City, town, or p	ost offi	ice. If you have a foreign address, also co	mplete sp	aces below	<i>'</i> .	Sta	te	ZIP c	ode		•	0,	jointly, want nd. Checking	
ERIE						PA	L	165	06		•		not change	ja
Foreign country	y name		F	oreign provi	ince/state/o	count	у	Foreig	ın postal c	ode	your tax	or refu	_	use
Filing Status	s	Single					Head of he	ouseh	old (HOF	H)				
Check only	×	Married filing jointly (even if only o	ne had ir	ncome)			_							
one box.		Married filing separately (MFS)					Qualifying	surviv	ing spou	use (C	QSS)			
		you checked the MFS box, enter the			use. If you	ı che	cked the HOF	or Q	SS box,	enter	the chi	ld's nar	ne if the	
	qu	ualifying person is a child but not you	ır depen	dent:										
Digital	At a	ny time during 2023, did you: (a) rec	eive (as a	a reward, a	award, or	payn	nent for prope	rty or	services); or (l	b) sell,			
Assets		nange, or otherwise dispose of a dig										☐ Ye	es 🛚 No	
Standard	Som	neone can claim:	pendent	☐ Yo	our spouse	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you											
Age/Blindnes	e Vou	: Were born before January 2, 1	050	Are blind	d Sno	use	: Was bor	n hefe	ore Janua	an/ 2	1050	Пь	s blind	
				_	•			14					see instructio	une).
Dependent		instructions). First name Last name			ial security umber		(3) Relationsh to you	ıp (Child t				r other depend	
If more than four	(.,.			-			. ,			1			$\overline{}$	
dependents,									[_			一 一	
see instruction and check	s									_			一一	
here]													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructio	ns)						1a		118,896	5 .
	b	Household employee wages not re	eported o	on Form(s)	W-2						1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)									1c			
attach Forms	d	Medicaid waiver payments not rep	orted on	n Form(s) V	V-2 (see ir	nstru	ctions)				1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Forr	m 2441, lin	ne 26 .						1e			
was withheld.	f	Employer-provided adoption bene	fits from	Form 883	9, line 29						1f			
If you did not	g	Wages from Form 8919, line 6 .									1g	_		
get a Form W-2, see	h	Other earned income (see instruct	,					· ·			1h	\perp		0.
instructions.	i	Nontaxable combat pay election (s	see instru	uctions) .			<u>li</u>						110 004	_
	z	Add lines 1a through 1h			· ; ·						1z	+	118,896	٥.
Attach Sch. B if required.	2a		2a		4.0		axable interest				2b	+	0.5	
	3a		3a				rdinary divide				3b	+		7.
Standard	4a		4a	6,2			axable amoun				4b	+	3,750	<i>.</i>
Deduction for—	5a	-	5a				axable amoun				5b			
Single or Married filing	6a c	Social security benefits Left you elect to use the lump-sum e	6a	nethod ch			axable amoun	ι			6b	+		
separately, \$13,850		Capital gain or (loss). Attach Sche		•		•	,			·	7		255	5
Married filing	7 8	Additional income from Schedule		•	•					٠ ـ	8	+	-20,269	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	•								9	+	102,719	
surviving spouse, \$27,700	10	Add lines 12, 25, 35, 45, 35, 65, 7, Adjustments to income from Sche		•							10	+		•
Head of household,	11	Subtract line 10 from line 9. This is									11	+	102,719	 Э
\$20,800	12	Standard deduction or itemized	•	-							12	+	27,700	
If you checked any box under	13	Qualified business income deduct		•		,					13	1		7.
Standard Deduction,	14										14	+	27,707	
see instructions.	15	Subtract line 14 from line 11. If zer							=		15	_	75 013	

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check if any fr	rom Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	8,557.
Credits	17	Amount from Schedule 2, line 3 .					- 	17	
	18	Add lines 16 and 17						18	8,557.
	19	Child tax credit or credit for other de	ependent	ts from Schedi	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	8,557.
	23	Other taxes, including self-employm						23	375.
	24	Add lines 22 and 23. This is your to						24	8,932.
Payments	25	Federal income tax withheld from:							
•	а	Form(s) W-2				25a 1	1,527		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c						25d	11,527.
If you have a	26	2023 estimated tax payments and a	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 Sched	dule 8812			28			
	29	American opportunity credit from Fo	orm 8863	3, 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	total other pa	ayments and refu	indable credits		32	
	33	Add lines 25d, 26, and 32. These ar	e your to	tal payments				33	11,527.
Refund	34	If line 33 is more than line 24, subtra	act line 2	4 from line 33.	This is the amour	nt you overpaid		34	2,595.
	35a	Amount of line 34 you want refunde			is attached, chec	ck here	🗆	35a	2,595.
Direct deposit?	b	Routing number 0 7 1 0 0 0 0 1 3 c Type: X Checking Savings							
See instructions.	d	Account number 6 5 2 0 8	6 0	2 1					
	36	Amount of line 34 you want applied							
Amount You Owe	37	Subtract line 33 from line 24. This is For details on how to pay, go to ww	37						
	38	Estimated tax penalty (see instruction	ons) .			38			
Third Party Designee		you want to allow another persor				_	Complete	e below.	X No
	De	signee's		Phone		Per	sonal ide	ntification	
		me		no.			nber (PIN)		
Sign		der penalties of perjury, I declare that I have ief, they are true, correct, and complete. De							, ,
Here	Yο	ur signature		Date	Your occupation		l If t	he IRS se	nt vou an Identity
	. 0	a. o.g. ata. o			Tour occupation		Pr	otection P	PIN, enter it here
Joint return?					SOFTWARE E		(se	e inst.)	
See instructions. Keep a copy for your records.	Sp	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupati		Ide		nt your spouse an ection PIN, enter it here
,		HOME MAKEK							
		one no. (224)520-0418 eparer's name Prepare	er's signat	Email address	GOWRISHANKARM	JTHU27@GMAIL. Date	PTIN		Check if:
Paid		. .	J		AND CITDED			02702	Self-employed
Preparer		M PRIYA RAM SAGAR GUPTA SYAM		A KAM SAG	JAK GUPTA	04/03/2024		82703	
Use Only		m's name GLOBAL TAXES I m's address 245 ROONEY CT		MCMT OV N	T 00016				(678)965-9522
	rir 'E	m's address 245 ROONEY CT	r BKU	MOMICK NO	00010		Fir	m's EIN	- 1040

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information. Attachment Sequence No. **01**

Your social security number

GOWF	OWRISHANKAR MUTHU & PRIYANKA RAJARATHINAM 676-4										
Par	t I Additional Income										
1	Taxable refunds, credits, or offsets of state and local income taxes				1	0.					
2a	Alimony received				a						
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	4						
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach S	Schedule E	Ē. [5	-20,269.					
6	Farm income or (loss). Attach Schedule F			(6						
7	Unemployment compensation			🗔	7						
8	Other income:										
а	Net operating loss	8a	()							
b	Gambling	8b	,								
С	Cancellation of debt	8c									
d	Foreign earned income exclusion from Form 2555	8d	()							
е	Income from Form 8853	8e	,								
f	Income from Form 8889	8f									
g	Alaska Permanent Fund dividends	8g									
h	Jury duty pay	8h									
i	Prizes and awards	8i									
i	Activity not engaged in for profit income	8j									
k	Stock options	8k									
ī	Income from the rental of personal property if you engaged in the rental										
-	for profit but were not in the business of renting such property	81									
m	Olympic and Paralympic medals and USOC prize money (see										
	instructions)	8m									
n	Section 951(a) inclusion (see instructions)	8n									
0	Section 951A(a) inclusion (see instructions)	80									
р	Section 461(I) excess business loss adjustment	8p									
q	Taxable distributions from an ABLE account (see instructions)	8q									
r	Scholarship and fellowship grants not reported on Form W-2	8r									
	Nontaxable amount of Medicaid waiver payments included on Form										
	1040, line 1a or 1d	8s	()							
t	Pension or annuity from a nonqualifed deferred compensation plan or										
-	a nongovernmental section 457 plan	8t									
u	Wages earned while incarcerated	8u									
z	Other income. List type and amount:										
_		8z									
9	Total other income. Add lines 8a through 8z				9						
10	Combine lines 1 through 7 and 9. This is your additional income . Ente				\forall						
	1040, 1040-SR, or 1040-NR, line 8				0	-20,269.					

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

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-				
	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	,	24a		_	
b	Deductible expenses related to income reported on line 8l from the				
		24b		_	
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	· · · · · · · · · · · · · · · · · · ·	24c		_	
d		24d		_	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f			
g		24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h			
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	24i			
j	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k			
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 Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	here and on	26	
	·				

SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Taxes

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. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
GOWRISHANKAR MITTHIL & PRIYANKA RAJARATHINAM

Your social security number 676-47-6234

GOW.	RIBHANKAK MOTHO & IRTIANKA KADAKATITINAM	1/ 0251	
Pa	tl Tax		
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	3	
Par	t II Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137		
6	Uncollected social security and Medicare tax on wages. Attach Form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.		
	If not required, check here	8	375.
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	
12	Net investment income tax. Attach Form 8960	12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	
		continued o	n page 2)

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

Part II Other Taxes (continued)

7	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount:			
		17a		
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b		
С	Additional tax on HSA distributions. Attach Form 8889	17c		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d	-	
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h	-	
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
ı	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
z	Any other taxes. List type and amount:			
		17z		
8	Total additional taxes. Add lines 17a through 17z		18	
9	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your total other taxe on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b.	es. Enter here and	21	375.

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Go to www.irs.gov/ScheduleD for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service

Name(s) shown on return
GOWRISHANKAR MUTHU & PRIYANKA RAJARATHINAM

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

Your social security number 676-47-6234

If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) Form(s) 8949, Part I, combine the result (or other basis) whole dollars. line 2. column (a) with column (a) 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 4,846. 4,593. 31. 284. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 284. 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 (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 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

6,678.

600.

5,671.

1,636.

Schedule D (Form 1040) 2023

1,007.

-1,036.

-29.

10 Totals for all transactions reported on Form(s) 8949 with

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 255. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 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. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. 12A

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

Social security number or taxpayer identification number

GOWRISHANKAR MUTHU & PRIYANKA RAJARATHINAM 676-47-6234 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 Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss) (d) (c) (a) (b) Date sold or Proceeds See the Note below See the separate instructions. Subtract column (e)

Description of property	Date acquired	Date sold of	Proceeds	See the Note below			Subtract column (e)
(Example: 100 sh. XYZ Ćo.)	(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).
ACORNS SECURITIES LLC	05/17/23	12/31/23	4,012.	3,974.	W	31.	69.
Robinhood Securities LLC	09/11/23	12/31/23	834.	619.			215.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc is checked), li i	lude on your ne 2 (if Box B	4,846.	4,593.		31.	284.

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 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side GOWRISHANKAR MUTHU & PRIYANKA RAJARATHINAM

Social security number or taxpayer identification number 676 - 47 - 6234

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(E) Long-term transactions(F) Long-term transactions	reported on	Form(s) 1099	-B showing bas				e)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	11/18/23	12/31/23	6,678.	5,671.			1,007.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above	al here and inc	lude on your					

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.

above is checked), or line 10 (if Box F above is checked) .

1,007.

6,678.

5,671.

Attachment Sequence No. 12A Form 8949 (2023)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side GOWRISHANKAR MUTHU & PRIYANKA RAJARATHINAM

Social security number or taxpayer identification number 676-47-6234

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

(i) Long to in tranoactions	not roportod	to you on i	71111 1000 B				
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Crypto LLC	11/17/23	12/31/23	600.	1,636.			-1,036.
2 Totals. Add the amounts in columns	(d), (e), (q), and	d (h) (subtract					
negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box L)	I here and inc is checked), lir	lude on your ne 9 (if Box E	600	1.636			-1.036

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

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

OMB No. 1545-0074

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

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

Attachment Sequence No. 13

Your social security number

GOWF	ISHANKAR MUTHU & PRIYANKA RAJARATHINAM						676-4	7-6234	
Part	Income or Loss From Rental Real Estate and Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			C . See	instru	ctions. If you ar	e an indi	ividual, rep	ort farm
	Did you make any payments in 2023 that would require you								
B I	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city, state, ZIF	code	e)						
Α	42/2, SINTHAMANI NAGAR AYOTHIYAPPATTANA	M SA	ALEM,TA	MIL	NADU	IN 63610	3		
В									
С									
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair in the state properabove.	rental	and	Fair Rental Days			Personal Use Days		QJV
Α	g personal use days. Check the QJ			Α		365		0	
В	if you meet the requirements to fi qualified joint venture. See instru			В					
С	quaimed joint venture. See instru	Otionic		С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Rent Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (descril			
						Propertie	s:		
ncon				Α		В			С
3	Rents received	3		6	50.				
4	Royalties received	4							
Exper		_							
5	Advertising	5							
6	Auto and travel (see instructions)	7		1,7	0.5				
7 8	Cleaning and maintenance	8		Ι,/	05.				
9	Commissions	9							
10	Insurance	10							
11	Management fees	11		1,4	1 0				
12	Mortgage interest paid to banks, etc. (see instructions)	12		1,4					
13	Other interest	13							
14	Repairs	14		4,7	55				
15	Supplies	15		5,2					
16	Taxes	16		- , -					
17	Utilities	17		4,3	00.				
18	Depreciation expense or depletion	18		3,4					
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		20,9	19.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21	-	-20,2	69.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(20,26	9.)	())(,
23a	Total of all amounts reported on line 3 for all rental proper	rties			23a		650.		
b	Total of all amounts reported on line 4 for all royalty proper	erties			23b				
С	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		455.		
е	Total of all amounts reported on line 20 for all properties				23e	20,	919.		
24	Income. Add positive amounts shown on line 21. Do not		-				24		
25	Losses. Add royalty losses from line 21 and rental real estate							(20,269.
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this ar						26		-20,269.

Department of the Treasury Internal Revenue Service

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Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.
Go to www.irs.gov/Form5329 for instructions and the latest information

OMB No. 1545-0074

2023

Attachment
Seguence No. 29

Namo	of individual subject to addition	anal tax. If married filing jointly, see instructions.	instructions and the latest informati			al security nu	
	ormanduar subject to addition	martax. Il marned illing jointly, see instructions.				7-6234	mber
GOW	KIBHANKAK MOTHO	Home address (number and street), or P.O. bo	ox if mail is not delivered to your home		070 4	Apt. no.	
						7.50	
	Your Address Only	City, town or post office, state, and ZIP code.	If you have a foreign address, also comple	te the spaces			
	u Are Filing This	below. See instructions.			If thic ic a	n amended	
	by Itself and Not Your Tax Return				return, check here		
*****	Tour Tux Hotum	Foreign country name	Foreign province/state/county	1	Foreign po	stal code	
		nal 10% tax on the full amount of the 8, without filing Form 5329. See insti		e able to re	port this	tax direct	tly on
Par		<u> </u>		ر مانید این	- /	*la a .a .a	
ı aı		x on Early Distributions. Complete tion) before you reached age 591/2.					
		ntract (unless you are reporting this					
		te this part to indicate that you quali					
		A distributions. See instructions.	,		,		
1	Early distributions inc	cludible in income (see instructions). F	or Roth IRA distributions, see ins	tructions.	1	3.7	750.
2		cluded on line 1 that are not subject to				3 / /	<u> </u>
	•	exception number from the instruction	•	•	2		
3		dditional tax. Subtract line 2 from line			3	3,7	750.
4	•	10% (0.10) of line 3. Include this amo			4		375.
		of the amount on line 3 was a distrib			,		
	include 25% of that a	amount on line 4 instead of 10%. See	instructions.				
Par	Additional Ta	x on Certain Distributions From	Education Accounts and AE	BLE Accou	nts. Co	mplete this	s part
		an amount in income, on Schedule fied tuition program (QTP), or on Sche				savings ac	count
5	Distributions include	d in income from a Coverdell ESA, a C	TP, or an ABLE account		5		
6	Distributions include	d on line 5 that are not subject to the	additional tax (see instructions)		6		
7	Amount subject to a	dditional tax. Subtract line 6 from line	5		7		
8	Additional tax. Ente	10% (0.10) of line 7. Include this amo			8		
Part		x on Excess Contributions to Ti	•	•		ed more to	your
		for 2023 than is allowable or you had	-		9.		
9	Enter your excess cor	tributions from line 16 of your 2022 For	m 5329. See instructions. If zero, g	o to line 15	9		
10		A contributions for 2023 are less t					
		n, see instructions. Otherwise, enter -					
11		distributions included in income (see i					
12		prior year excess contributions (see in	•		10		
13					13		
14 15		ntributions. Subtract line 13 from line stor 2023 (see instructions)			14		
16		itions. Add lines 14 and 15			16		
17		6% (0.06) of the smaller of line 16 or t			10		
17		23 contributions made in 2024). Include t			17		
Part		x on Excess Contributions to R		-	uted mo	re to your	Roth
		nan is allowable or you had an amoun	·	•		y =	
18		tributions from line 24 of your 2022 For	-		18		
19	If your Roth IRA con	tributions for 2023 are less than your	maximum allowable				
	contribution, see inst	ructions. Otherwise, enter -0	19				
20		m your Roth IRAs (see instructions)					
21	Add lines 19 and 20				21		
22	Prior year excess co	ntributions. Subtract line 21 from line	18. If zero or less, enter -0		22		

Excess contributions for 2023 (see instructions)

Additional tax. Enter 6% (0.06) of the **smaller** of line 24 **or** the value of your Roth IRAs on December 31, 2023 (including 2023 contributions made in 2024). Include this amount on Schedule 2 (Form 1040), line 8

23

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Form 5329 (2023) Page **2**

Part '				tributions to Coverdell ESAs. Contains allowable or you had an amount	•	•		•
26				of your 2022 Form 5329. See instructions			26	
27				SAs for 2023 were less than the				
			-	uctions. Otherwise, enter -0	27			
28	2023	distributions	from your Coverdell ESA	As (see instructions)	28			
29	Add I	ines 27 and 2	28				29	
30	Prior	year excess	contributions. Subtract li	ne 29 from line 26. If zero or less, ente	r-0		30	
31	Exces	ss contribution	ons for 2023 (see instruct	ions)			31	
32	Total	excess cont	ributions. Add lines 30 ar	nd 31			32	
33			` ,	er of line 32 or the value of your Coverde			00	
Part \				in 2024). Include this amount on Schedu ibutions to Archer MSAs. Comple		•	33	playar aantributaa
rait				nan is allowable or you had an amount	•			
34				of your 2022 Form 5329. See instruction			34	1 0020.
35				or 2023 are less than the maximum		O to line oo	04	
33			-	herwise, enter -0	35			
36				from Form 8853, line 8	36			
37		ines 35 and					37	
38				ne 37 from line 34. If zero or less, ente			38	
39		-		ions)			39	
40			·	nd 39			40	
41				smaller of line 40 or the value of years.				
71	Dece	mber 31, 20	23 (including 2023 contri	butions made in 2024). Include this at	mount on S	Schedule 2	41	
Part V				tributions to Health Savings Ac				this part if you
dit		someone or		nployer contributed more to your HS	-	-	•	•
42				of your 2022 Form 5329. If zero, go to	o line 47		42	
43				2023 are less than the maximum				
70			-	herwise, enter -0	43			
44				orm 8889, line 16	44			
45		ines 43 and	_				45	
46				ne 45 from line 42. If zero or less, ente			46	
47		-		ions)			47	
48			•	nd 47			48	
49				aller of line 48 or the value of your HS				
				2024). Include this amount on Schedule			49	
Part V		-		ibutions to an ABLE Account. Co		-	ntributi	ions to your ABLE
			2023 were more than is a		'	•		,
50	Exces	ss contribution	ons for 2023 (see instruct	ions)			50	
51	Addit	ional tax. E	Enter 6% (0.06) of the s	maller of line 50 or the value of yo	ur ABLE a	account on		
	Dece	mber 31, 202	23. Include this amount o	n Schedule 2 (Form 1040), line 8			51	
Part I	X	Additional	Tax on Excess Accur	nulation in Qualified Retirement	Plans (In	cluding IR	As). (Complete this part
		if you did no	t receive the minimum re	quired distribution from your qualified	retirement	plan.		
52	Minim	num required	d distribution for 2023 (se	e instructions)			52	
53	Amou	ınt actually c	distributed to you in 2023	(see instructions)			53	
54	Subtract line 53 from line 52. If zero or less, enter -0						54	
55	Addit	i onal tax. S	ee instructions for how to	o calculate the additional tax. If you q	ualify for th	ne 10% tax		
	rate c	n excess ac	cumulations in at least or	ne qualified retirement plan, check this	box.			
	Includ	de this amou		040), line 8 or Form 1041, Schedule G			55	
Sign Here C Are Filing T by Itself and Your Tax Re			Under penalties of perjury, I dec belief, it is true, correct, and com	clare that I have examined this form, including accordinate. Declaration of preparer (other than taxpayer) is	ompanying atta s based on all i	chments, and to nformation of wh	the be	st of my knowledge and parer has any knowledge.
		If and Not With						
		eturn	Your signature	T-	T =	Date		I
Paid	aror	Print/Type pre	parer's name	Preparer's signature	Date	Check self-em		PTIN
Prepa Use 0		Firms is names						
036 (July	Firm's address				Phone no.		

BAA

Department of the Treasury Internal Revenue Service

Nondeductible IRAs

Attach to 2023 Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form8606 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. 48

Name. If married, file a separate form for each spouse required to file 2023 Form 8606. See instructions. Your social security number 676-47-6234 GOWRISHANKAR MUTHU Home address (number and street, or P.O. box if mail is not delivered to your home) Apt. no. Fill in Your Address Only if You Are City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instructions). Filing This Form by **Itself and Not With** Foreign country name Foreign province/state/county Foreign postal code **Your Tax Return** Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, Traditional SEP, and Traditional SIMPLE IRAs Complete this part only if one or more of the following apply. • You made nondeductible contributions to a traditional IRA for 2023. • You took distributions from a traditional, traditional SEP, or traditional SIMPLE IRA in 2023 and you made nondeductible contributions to a traditional IRA in 2023 or an earlier year. For this purpose, a distribution does not include a rollover (other than certain qualified disaster distribution repayments from 2023 Form(s) 8915-F), qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions. • You converted part, but not all, of your traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023 and you made nondeductible contributions to a traditional IRA in 2023 or an earlier year.

1	Enter your nondeductible contributions to traditional IRAs for 2023, including those made for 2023		
2	from January 1, 2024, through April 15, 2024. See instructions	2	
3	Add lines 1 and 2	3	
J	In 2023, did you take a distribution from traditional, traditional SIMPLE IRAs, or make a Roth, Roth SEP, No — Enter the amount from line 3 on line 14. Do not complete the rest of Part I.	3	
	or Roth SIMPLE IRA conversion? Yes —— Go to line 4.		
4	Enter those contributions included on line 1 that were made from January 1, 2024, through April 15, 2024	4	
5	Subtract line 4 from line 3	5	
6	Enter the value of all your traditional, traditional SEP, and traditional SIMPLE IRAs as of December 31, 2023, plus any outstanding rollovers. Subtract certain repayments of qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions)	6	
7	Enter your distributions from traditional, traditional SEP, and traditional SIMPLE IRAs in 2023. Do not include rollovers (other than repayments of qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions)); qualified charitable distributions; a one-time distribution to fund an HSA; conversions to a Roth, Roth SEP, or Roth SIMPLE IRA; certain returned contributions; or recharacterizations of traditional IRA contributions (see instructions)	7	
8	Enter the net amount you converted from traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023. Also, enter this amount on line 16	8	
9	Add lines 6, 7, and 8		
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000"		
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth, Roth SEP, or Roth SIMPLE IRAs. Also, enter this amount on line 17		
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth, Roth SEP, or Roth SIMPLE IRA 12		
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions	13	
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2023 and earlier years . Subtract line 12 from line 7	14 15a	
15a	Enter the amount on line 15a attributable to qualified disaster distributions, if any, from 2023 Form(s)	ıba	
b	8915-F (see instructions). Also, enter this amount on 2023 Form(s) 8915-F, line 18, as applicable (see instructions)	15b	
С	Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on 2023 Form 1040, 1040-SR, or 1040-NR, line 4b	15c	
	Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age 59½ at the time of the distribution. See instructions.		

Form 8606 (2023) Page **2**

Part			onversions From Tradition MPLE IRAs	onal, Traditional SEP, or Traditio	nal SIMPLE IR	As to Roth	, Roth SEP, or
			e this part if you converted p P, or Roth SIMPLE IRA in 202	art or all of your traditional, traditional 23.	SEP, and tradition	onal SIMPLE	IRAs to a Roth,
16	If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023						
17	If you oline 16						
18	Form 1	040, 10	40-SR, or 1040-NR, line 4b	ne 16. If more than zero, also include			
Part l	II D	istribu	tions From Roth, Roth S	SEP, or Roth SIMPLE IRAs			
	di 89	stributio 915-F (s	on does not include a rollove	distribution from a Roth, Roth SEP, or er (other than a repayment of a qualific haritable distribution, one-time distrib structions).	ed disaster distrib	oution from 2	023 Form(s)
19	includir	ng any d	qualified first-time homebuye	s from Roth, Roth SEP, and Roth Ser distributions, and any qualified disa	ster distributions	from	6,250.
20	2023 Form(s) 8915-F (see instructions)						7,233
21	Subtract line 20 from line 19. If zero or less, enter -0						6,250.
22	Enter your basis in Roth, Roth SEP, and Roth SIMPLE IRA contributions (see instructions). If line 21 is zero, stop here					21 is	2,500.
23	Subtract line 22 from line 21. If zero or less, enter -0- and skip lines 24 and 25. If more than zero, you may be subject to an additional tax (see instructions)				o, you	3,750.	
24				ditional, traditional SEP, and traditio a Roth, Roth SEP, or Roth SIMPLE IF			
25a	Subtrac	ct line 2	4 from line 23. If zero or less	s, enter -0- and skip lines 25b and 25c		25a	3,750.
b	8915-F	(see in	structions). Also, enter this a	to qualified disaster distributions, if a amount on 2023 Form(s) 8915-F, line	19, as applicable	e (see	
							0.
С				ne 25a. If more than zero, also includ			3,750.
_	lere On Are Fili	ly	Under penalties of perjury, I declare the	nat I have examined this form, including accompany ation of preparer (other than taxpayer) is based on a	ring attachments, and to	the best of my l	knowledge and belief, it
and N	orm by						
Tax Re	eturn	D : . ~	Your signature	In ,	Date		DTM
Paid		Print/Ty 	pe preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
Prepa	arer	F: '					
Use (Only	Firm's name Firm's Ell Firm's address Phone no					
		rimsa	uuress			Phone no.	Form 8606 (2023)

Department of the Treasury

Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2023

Attachment Sequence No. **55**

Name(s) shown on return

GOWRISHANKAR MUTHU & PRIYANKA RAJARATHINAM

Your taxpayer identification number
676-47-6234

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)	
i				
ii				
iii				
iv				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2		
3 4	Qualified business net (loss) carryforward from the prior year	3 (5	
5 6	Qualified business income component. Multiply line 4 by 20% (0.20)	6 33.	5	
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	8 33.		
9			9	7.
10	Qualified business income deduction before the income limitation. Add lines 5 and	i i	10	7.
11	Taxable income before qualified business income deduction (see instructions)	11 75,019.		
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	12 48.		
13	Subtract line 12 from line 11. If zero or less, enter -0	13 74,971.		1.4.00.4
14	Income limitation. Multiply line 13 by 20% (0.20)	14	14,994.	
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also	15	7	
16	the applicable line of your return (see instructions)	16	7.	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a	10	ι υ.	
17	zero, enter -0	17	(0.	