(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

IIILEIIIAI N	evenue de vice							
Submis	sion Identification Number (SID)							
Taxpayer'	's name		Social	security	y numb	 er		
SHIV	A MANOJ REDDY GANGULA		844	-36-	-0665			
Spouse's			Spouse				ımber	
Part I	-	(Enter	year y	ou a	re aut	noriz	zing.)	
	hole dollars only on lines 1 through 5.							
	form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				 a		1 - 0	701
	Adjusted gross income				2			781. 147.
	Total tax				3			
	Amount you want refunded to you				4			839.
	Amount you want retained to you				5		۷,	692.
Part I		t and k	eep a	copy		our	retur	n)
Under pomy know return (o to send for any c Agent to payment authoriza payment business taxes to personal Electroni	enalties of perjury, I declare that I have examined a copy of the income tax return (original or an evidedge and belief, it is true, correct, and complete. I further declare that the amounts in Pariginal or amended) I am now authorizing. I consent to allow my intermediate service provider my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accounts of my federal taxes owed on this return and/or a payment of estimated tax, and the financial action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the treation of the payment (settlement) date. I also authorize the financial institutions involved in information necessary to answer inquiries and resolve issues related identification number (PIN) below is my signature for the income tax return (original or amentic Funds Withdrawal Consent. **Per's PIN: check one box only** I authorize GLOBAL TAXES LLC to enter or general signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PI below.	mended) rt I abovo, transmi n for reje ze the U. ount indic institutio erminate tion requ d in the to the pa ded) I an	I am no e are the tter, or ection of S. Treas cated in no to det the authorocess ayment. In now a now authorocess are the authorocess ayment.	w auther amore amo	norizing punts from the return the electric and the receive and the receive the electric and the receive and the receive and the return the receive and the return the receive the return the re	g, and om the control of the control	to the incorriginate (b) the incorriginate (b) the incorriginate in account oke (constant) account oke (constant) account oke (constant) account oke (constant) of the incorrect oken inco	e best of ome tax or (ERO) e reason reason ware for ant. This ancel) a than 2 ment of that the able, my as my
Your siç		ate▶_						
Snouse	e's PIN: check one box only							
	I authorize to enter or ge	nerate r	nv PIN					as my
	ERO firm name	ilorato i	y .	Ent	er five o	ligits,	but	ao my
	signature on the income tax return (original or amended) I am now authorizing.			don	't enter	all ze	eros	
	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 PI below.							
Spouse	o's signature ▶ Da	ate ►						
	Practitioner PIN Method Returns Only—continue	below						
Part II	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	5 0	8 2	2 7	1
			Dor	i't ente	r all zei	ros		
authorize	that the above numeric entry is my PIN, which is my signature for the electronic individual in ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I an ents of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providence.	m submi	tting thi	s retu	rn in a	ccord	lance	
ERO's	signature ▶ Da	ate 🕨						
	ERO Must Retain This Form — See Instructi	ons						
	Don't Submit This Form to the IRS Unless Requeste		o So					

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



For the year Jan	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling		·,	20		See se	parate ir	nstructions.	
Your first name	and m	iddle initial	Last na	ame						Your so	cial secu	urity number	_
SHIVA MA	LONA	REDDY	GANG	HULA						844	36	0665	
If joint return, s	pouse's	s first name and middle initial	Last na	ame					:	Spouse	s social s	security numb	- oei
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Ар	t. no.		Preside	ntial Elec	ction Campai	gn
8601 ANI	DERS	ON MILL RD					72	21			•	ou, or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	te	ZIP cod	le				ointly, want \$ d. Checking a	
AUSTIN					TX	Σ	7872	9		-		ot change	2
Foreign country	y name			Foreign province/state/o	count	y	Foreign	postal c	ode	your tax	k or refun		
											You	J Spou	se
Filing Status	, X	Single				☐ Head of ho	ousehol	d (HOH	1)				
Check only		Married filing jointly (even if only or	ne had	income)									
one box.		Married filing separately (MFS)				☐ Qualifying	survivir	ıg spoı	use (C	QSS)			
	If y	If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter										ne if the	
	qu	alifying person is a child but not you	ır deper	ndent:									_
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	navn	nent for prope	rtv or se	ervices): or (l	b) sell.			_
Assets		ange, or otherwise dispose of a digi									☐ Yes	s 🛛 No	
Standard	Som	eone can claim: You as a de	penden	t Your spouse	e as	a dependent							_
Deduction		Spouse itemizes on a separate retur		•		•							
A (DII l								. 1	0	4050		L. P I	
		Were born before January 2, 1	959 [T -	ouse:		(4)					blind	
Dependents				(2) Social security number	'	(3) Relationsh to you	ip (4)	neck t Child t				ee instruction other depender	
If more	(1) F	irst name Last name		number		to you		1		uit	Oredit 101		
than four dependents,								l	<u> </u>			<u> </u>	_
see instruction	s							[<u> </u>	
and check here	1 —							l	_				_
-	1a	Total amount from Form(s) W-2, be	ov 1 (cc	oo instructions)				l		1a		 172,184	_
Income	b	• • • • • • • • • • • • • • • • • • • •	,	•						1b		1/2,104	·
Attach Form(s)	C	Household employee wages not reported on Form(s) W-2							10			_	
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep		•						1d			_
W-2G and	e	Taxable dependent care benefits f		, , , ,	iistiu	ictions)				1e			_
1099-R if tax was withheld.	f	Employer-provided adoption bene		•						1f			_
If you did not	g g	Wages from Form 8919, line 6.								1g			_
get a Form	h	Other earned income (see instructi								1h		0	-
W-2, see instructions.	i	Nontaxable combat pay election (s	,			1i	Ì						_
	z	A al al 15-a a - 4 a - 4 b - 1 a - 1 a - 4 b -								1z		172,184	
Attach Sch. B	2a	1	2a		b Ta	axable interest	t.			2 b			_
if required.	3a	Qualified dividends	3a	95.	b 0	rdinary divider	nds .			3b	,	113	
	4a	IRA distributions	4a			axable amount				4b	,		
Standard Deduction for—	5a	Pensions and annuities	5a		b Ta	axable amount	t			5b	,		
Single or	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	method, check here	(see	instructions)			. \square				
\$13,850	7	Capital gain or (loss). Attach Scheo	dule D i	f required. If not requ	uired,	check here			. \square	7		301	
Married filing jointly or	8	Additional income from Schedule	1, line 1	0						8		-13,817	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8.	This is your total inc	ome	e				9		158,781	
\$27,700	10	Adjustments to income from Sche	dule 1,	line 26						10			
Head of household,	11	Subtract line 10 from line 9. This is	your a	djusted gross incon	ne					11		158,781	
\$20,800 If you checked	12	Standard deduction or itemized	deduct	tions (from Schedule	A)					12		13,850	
any box under	13	Qualified business income deducti	ion fron	n Form 8995 or Form	899	5-A				13	i	0	
Standard Deduction,	14	Add lines 12 and 13								14		13,850	
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our t	axable incom	ie .			15	, :	144,931	

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	28,147.
Credits	17	Amount from Schedule 2, lin	те 3					17	
	18	Add lines 16 and 17						18	28,147.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	те 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	3. If zero or less, o	enter -0				22	28,147.
	23	Other taxes, including self-e			•			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	28,147.
Payments	25	Federal income tax withheld	l from:			1 1			
	а	Form(s) W-2				25a 3	0,827.		
	b	Form(s) 1099				25b	12.		
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	30,839.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return	., . ,		26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			· · No ·	27			
allacii Scii. Elc.	28	Additional child tax credit fro	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	3, line 8 . .		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	30,839.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	2,692.
	35a	Amount of line 34 you want			is attached, che	ck here	🗆	35a	2,692.
Direct deposit?	b	Routing number 1 0 1			c Type: 🛛	Checking	Savings		
See instructions.	d	Account number 5 1 8	0 0 6 7	0 6 5 1	L 5				
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another				' See			
Designee		• .					Complete	below.	⋈ No
_		signee's		Phone			sonal ident	ification	
		me		no.			nber (PIN)		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com							, ,
Here				Date	Your occupation				nt you an Identity
	10	ur signature		Date	Tour occupation				IN, enter it here
Joint return?					SOFTWARE	ENGINEER	(see	inst.)	
See instructions. Keep a copy for your records.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat	ion	Ider		nt your spouse an ection PIN, enter it here
	Ph	Phone no. (562)786-9787 Email address GANGULASHIVA@GMAIL.COM							
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/16/2024	P0208	2703	Self-employed
Preparer		m's name GLOBAL TA	1			•	<u> </u>		(678)965-9522
Use Only	Fir		Y CT E BRU	NSWICK N	J 08816		Firm	ı's EIN	84-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

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

Name	s) shown on Form 1040, 1040-SR, or 1040-NR	cial s	ecurity number		
SHIV	A MANOJ REDDY GANGULA		844-3	6-06	65
Par	t I 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. Atta	ach Schedule	ÐΕ.	5	-13,817.
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			
j	Activity not engaged in for profit income	8j			
k	Stock options	8k			
I	Income from the rental of personal property if you engaged in the rental				
	for profit but were not in the business of renting such property	81			
m	Olympic and Paralympic medals and USOC prize money (see				
	instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
0	Section 951A(a) inclusion (see instructions)	80			
р	Section 461(I) excess business loss adjustment	8p			
q	Taxable distributions from an ABLE account (see instructions)	8q			
r	Scholarship and fellowship grants not reported on Form W-2	8r			

8s

8t

8u

8z

u Wages earned while incarcerated

9

10

z Other income. List type and amount:

Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form

-13,817.

9

10

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

Par	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	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	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	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)	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:				
05	Tatal allows allow to some Add lines Ode thousands Ode	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	. ∟nter	nere and on		
				26	I. 4 (F 1010) 0000
	BAA	REV 02/	11/24 PRO	Schedu	le 1 (Form 1040) 2023

SCHEDULE D (Form 1040)

Department of the Treasury

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**

Internal Revenue Service Name(s) shown on return Your social security number 844-36-0665 SHIVA MANOJ REDDY GANGULA Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? 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 Form(s) 8949, Part I, combine the result (sales price) (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. 801. 805. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked 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 -4. 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

3,661.

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

3,356.

11

12

13

14

15

305.

305.

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 301. • 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? X 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? X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. 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 ☐ 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.

Attachment Sequence No. 12A

OMB No. 1545-0074

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

Social security number or taxpayer identification number

844-36-0665

SHIVA MANOJ REDDY GANGULA

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

broker and may even tell you which box to check. Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see

instructions). For long-term transactions, see page 2.

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

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

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

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

(C) Short-term transactions	not reported	I to you on F	orm 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate instructions.	Adjustment, i If you enter an enter a co 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)		(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
WALMART	01/01/23	12/31/23	40.	38.			2.
Wealthfront Brokerage LLC	01/01/23	12/31/23	761.	767.			-6.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above should be placed) or line 2 (if Box A).	al here and inc is checked), lir	lude on your ne 2 (if Box B	801	805			_4

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 SHIVA MANOJ REDDY GANGULA

Social security number or taxpayer identification number 844-36-0665

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.

		•	•		-			
× (C) Long-term	transactions	reported on Form(s)	1099-B shov	ving basis wa	s reported to the	e IRS (see Note above))
□ (E	Long-term	transactions i	reported on Form(s)	1099-B show	ving basis wa :	sn't reported to	the IRS	
☐ (F) Long-term	transactions r	not reported to you	on Form 1099	9-B			

1	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	See the separate instructions.		(h) Gain or (loss) Subtract column (e)
Description of property (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).
WALMART	01/01/23	12/31/23	3,508.	3,219.			289.
WALMART	01/01/22	12/31/23	35.	37.			-2.
Wealthfront Brokerage LLC	01/01/23	12/31/23	118.	100.			18.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above	al here and inc is checked), lir	lude on your ne 9 (if Box E		2.255			20-
above is checked), or line 10 (if Box	r above is chec	kea)	3,661.	3,356.			305.

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.

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s)	shown on return						,	Your socia	l security	number
SHIV	A MANOJ REDDY GA	NGULA						844-36	-0665	
Part	Note: If you are in the rental income or los	s From Rental Real Estate an he business of renting personal proper s from Form 4835 on page 2, line 40.	ty, use	Schedule						
		ents in 2023 that would require you								
B I	f "Yes," did you or will y	ou file required Form(s) 1099? .							☐ Ye	s 🗌 No
1a	Physical address of ea	ach property (street, city, state, ZIF	ode	e)						
A	титмма.ттрет мас	ARKURNOOL TELANGANA IN	5094	106						
B	THEFT TO THE TWICE		307.	100						
C										
1b	Type of Property (from list below)		or each rental real estate property listed				ir Rental Days			QJV
A	3	personal use days. Check the Qu			Α		365	-	0	
В	3	if you meet the requirements to f	ile as	a	В		303		U	
C		qualified joint venture. See instru	ictions	S.	С					
	of Property:					<u> </u>				
	Single Family Residence	e 3 Vacation/Short-Term Ren	tal	5 Lanc	ı	7	Self-Rental			
	Multi-Family Residence	4 Commercial		6 Roya			Other (descri	be)		
	Train Farmy Flooraction	- Commercial								
_							Propertie	s:		
Incom					Α	0.0	В			С
3			3		6	00.				
4			4							
Exper			_			-				
5			5							
6		structions)	6		1 2	1.0				
7	_	nce	7		⊥,3	10.				
8			8							
9			9							
10 11	_	sional fees	10		1 0	7.5				
12	•	to books ata (ana instructions)	12		1,0	75.				
13		to banks, etc. (see instructions)	13							
14			14		2 2	85.				
15	•		15			47.				
16			16		2,0	1/.				
17			17		4,4	75				
18		or depletion	18		1,4					
19	Other (list)	·	19							
20		nes 5 through 19	20		14,4	17.				
21	•	ne 3 (rents) and/or 4 (royalties). If			,					
		structions to find out if you must								
			21		-13,8	17.				
22	Deductible rental real	estate loss after limitation, if any,								
		tructions)	22	(13,81	7.)	()(
23a	Total of all amounts rep	oorted on line 3 for all rental prope	rties			23a		600.		
b	Total of all amounts rep	ported on line 4 for all royalty prop	erties			23b				
С	-	ported on line 12 for all properties				23c				
d	Total of all amounts rep	ported on line 18 for all properties				23d	1,	425.		
е	Total of all amounts rep	ported on line 20 for all properties				23e	14,	417.		
24	Income. Add positive a	amounts shown on line 21. Do not	inclu	de any lo	sses			24		
25	Losses. Add royalty loss	ses from line 21 and rental real estate	e losse	es from lin	e 22. E	nter to	tal losses here	25 (13,817.
26		e and royalty income or (loss).								
	here. If Parts II, III, and	d IV, and line 40 on page 2 do no	t appl	y to you,	also e	nter th	nis amount or	n		
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar	mount	in the to	tal on li	ne 41	on page 2 .	26		-13,817.

Department of the Treasury

Internal Revenue Service

Health Savings Accounts (HSAs)

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

Go to www.irs.gov/Form8889 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. 52

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

SHIVA MANOJ REDDY GANGULA

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions.

844-36-0665

Befor	<i>re you begin:</i> Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if	requ	ired.
Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for		
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2023. See instructions	X Se	elf-only \square Family
2	HSA contributions you made for 2023 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2023. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	0.
3	If you were under age 55 at the end of 2023 and, on the first day of every month during 2023, you were, or were considered, an eligible individual with the same coverage, enter \$3,850 (\$7,750 for family coverage). All others , see the instructions for the amount to enter	3	3,850.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2023 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2023, also include any amount contributed to your spouse's Archer MSAs	4	0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5	3,850.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family		
	coverage under an HDHP at any time during 2023, see the instructions for the amount to enter	6	3,850.
7	If you were age 55 or older at the end of 2023, married, and you or your spouse had family coverage under an HDHP at any time during 2023, enter your additional contribution amount. See instructions.	7	0.
8	Add lines 6 and 7	8	3,850.
9	Employer contributions made to your HSAs for 2023		
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	3,850.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	0.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	0.
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		
Part	HSA Distributions. If you are filing jointly and both you and your spouse each have sepa a separate Part II for each spouse.	arate	HSAs, complete
14a	Total distributions you received in 2023 from all HSAs (see instructions)	14a	6,613.
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b	
С	Subtract line 14b from line 14a	14c	6,613.
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	6,613.
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f	16	0.
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	
Part	Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructi completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.	ions k	
18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f .	20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21	

BAA

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	Your taxpayer identification number
SHIVA MANOJ REDDY GANGULA	844-36-0665

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	(c) Qualified business income or (loss)		
i				
ii				
iii				
iv				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2		
3	Qualified business net (loss) carryforward from the prior year	3 (
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4		
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6 1.		
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 1.		
9			9	0.
10	Qualified business income deduction before the income limitation. Add lines 5 ar		10	0.
11	Taxable income before qualified business income deduction (see instructions)	11 144,931.		
12	Enter your net capital gain, if any, increased by any qualified dividends	10		
40	(see instructions)	12 396. 13 144,535.	-	
13 14	Subtract line 12 from line 11. If zero or less, enter -0	,	14	28,907.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also		14	20,907.
13	the applicable line of your return (see instructions)		15	0.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater that		16	(0.
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a			,
	zero, enter -0		17	(0.)

Clean Vehicle Credits

OMB No. 1545-2137

2023

Attachment
Sequence No. 69

Department of the Treasury Internal Revenue Service Name(s) shown on return Attach to your tax return.

Go to www.irs.gov/Form8936 for instructions and the latest information.

Identifying number SHIVA MANOJ REDDY GANGULA 844-36-0665 Notes: • Complete a separate Schedule A (Form 8936) for each clean vehicle placed in service during the tax year. • Individuals completing Parts II, III, or IV, must also complete Part I. See "Note" text below. **Modified Adjusted Gross Income Amount** Part I 1a Enter the amount from line 11 of your 2023 Form 1040, 1040-SR, or 1040-NR 158,781. Enter any income from Puerto Rico you excluded 1b Enter any amount from Form 2555, line 45 1c Enter any amount from Form 2555, line 50 1d Enter any amount from Form 4563, line 15 1e 2 2 Add lines 1a through 1e 158,781. 170,533. Enter the amount from line 11 of your 2022 Form 1040, 1040-SR, or 1040-NR 3a За Enter any income from Puerto Rico you excluded 3b Enter any amount from Form 2555, line 45 Зс Enter any amount from Form 2555, line 50 3d Enter any amount from Form 4563, line 15 4 170,533. Enter the **smaller** of line 2 or line 4 5 158,781. Credit for Business/Investment Use Part of New Clean Vehicles Part II Note: Individuals can't claim a credit on line 6 if Part I, line 5, is more than \$150,000 (\$300,000 if married filing jointly or a qualifying surviving spouse; \$225,000 if head of household). Enter the total credit amount figured in Part II of Schedule(s) A (Form 8936) . . . 6 6 7 New clean vehicle credit from partnerships and S corporations (see instructions) 7 Business/investment use part of credit. Add lines 6 and 7. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1y . . . 8 Part III **Credit for Personal Use Part of New Clean Vehicles**

	Note: You can't claim the Part III credit if Part I, line 5, is more than \$150,000 (\$300,000 if m qualifying surviving spouse; \$225,000 if head of household).	arried	I filing jointly or a
9	Enter the total credit amount figured in Part III of Schedule(s) A (Form 8936)	9	
10	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18	10	
11	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)	11	
12	Subtract line 11 from line 10. If zero or less, enter -0- and stop here. You can't claim the personal use part of the credit	12	
13	Personal use part of credit. Enter the smaller of line 9 or line 12 here and on Schedule 3 (Form 1040), line 6f. If line 12 is smaller than line 9, see instructions	13	

Subtract line 16 from line 15. If zero or less, enter -0- and stop here. You can't claim the Part IV credit 17 17 Enter the smaller of line 14 or line 17 here and on Schedule 3 (Form 1040), line 6m. If line 17 is 18 18 **Credit for Qualified Commercial Clean Vehicles** Part V Enter the total credit amount figured in Part V of Schedule(s) A (Form 8936) 19 19 20 Qualified commercial clean vehicle credit from partnerships and S corporations (see instructions) . 20 21 Add lines 19 and 20. Partnerships and S corporations, stop here and report this amount on Schedule

21

SCHEDULE A (Form 8936)

Clean Vehicle Credit Amount

OMB No. 1545-2137

2023

Attachment Sequence No. **69A**

Department of the Treasury Internal Revenue Service

Attach to your tax return.

Go to www.irs.gov/Form8936 for instructions and the latest information.

Name(s) shown on return			Identifying number						
SHIVA MANOJ REDDY GANGULA		8	844-36-0665						
Part	Vehicle Details								
1a	Year	_	2023						
b	Make		TESLA						
С	Model		MODEL Y						
2	Vehicle identification number (VIN) (see instructions)	5	P A	0 6	3	5 3	1		
3	Enter date vehicle was placed in service (MM/DD/YYYY)		01/28/2023						
4	Was the vehicle used primarily outside the United States? Answer "No" if it was but an excepti ☐ Yes. Stop here. You can't claim a credit amount for a vehicle used primarily outside the Ur ☒ No.	• •							
5	Does the VIN entered on line 2 belong to a new clean vehicle placed in service during the tax definitions. ✓ Yes. Go to Part II. ✓ No. Go to line 6.	yea	ar? See	instru	ction	s for			
6	Does the VIN entered on line 2 belong to a previously owned clean vehicle acquired after 202 the tax year? See instructions for definitions. Yes. Go to Part IV. No. Go to line 7.	22 8	and pla	ced in	servi	ice du	ring		
7 Part	during the tax year? See instructions for definitions. Yes. Go to Part V. No. Stop here. You can't use this schedule to figure a credit amount for a vehicle not described on line 5, 6, or 7.								
8	 Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person. ☒ Yes. ☐ No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to resale. 								
9	Tentative credit amount (see instructions)		9		7	7,500)		
10	Business/investment use percentage (see instructions)	1	0				%		
11	Multiply line 9 by line 10. Include this credit amount on line 6 in Part II of Form 8936. If you entered 100% on line 10, stop here. Otherwise, go to Part III below	1	1			C)		
Part	Credit Amount for Personal Use Part of New Clean Vehicle	_							
12	Subtract line 11 from line 9 in Part II. Stop here and include this credit amount on line 9 in Part III of Form 8936	1	2		,	7,500	0		

Schedu	e A (Form 8936) 2023		Page 2
Part			
13a	Is the sales price of the vehicle more than \$25,000?		
	Yes. Stop here. The vehicle doesn't qualify for the Part IV credit.		
	∐ No.		
b	Did you acquire the vehicle for use and not for resale? Answer "No" if you are leasing the vehic	le fron	n another person.
	☐ Yes.		
	No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or a	cquire	ed for resale.
С	Can you be claimed as a dependent on another person's tax return, such as your parent's return	rn?	
	☐ Yes. Stop here. You can't claim a credit amount if you can be claimed as a dependent.		
	□ No.		
d	Is the vehicle a qualified fuel cell motor vehicle? See instructions.		
	☐ Yes.		
	☐ No.		
14	Enter the sales price of the vehicle	14	
15	Multiply line 14 by 30% (0.30)	15	
16	Maximum vehicle credit amount	16	4,000.
10	Waximum vehicle credit amount	10	4,000.
17	Enter the smaller of line 15 or line 16. Stop here and include this credit amount on line		
	14 in Part IV of Form 8936	17	
Part	V Credit Amount for Qualified Commercial Clean Vehicle		
18a	Is the vehicle of a character subject to the allowance for depreciation? Answer "Yes" if the exceentities discussed in the instructions applies. Yes. No. Stop here. The vehicle is not a qualified commercial clean vehicle unless the exception		
b	Did you acquire the vehicle for use or to lease to others, and not for resale? Answer "No" if you another person. Yes. No. Stop here. You can't claim a credit amount for a vehicle you didn't acquire for use or to resale.		_
С	Is the vehicle also powered by gas or diesel? See instructions. Yes. No.	1	
19	Enter the cost or other basis of the vehicle. See instructions	19	
20	Section 179 expense deduction (see instructions)	20	
21	Subtract line 20 from line 19	21	
	M III I II OA I 450((0.45) [000((0.00) (1) II		
22	Multiply line 21 by 15% (0.15) [30% (0.30) if the answer on line 18c above is "No"]	22	
23	Enter the incremental cost of the vehicle. See instructions	23	
24	Enter the smaller of line 22 or line 23	24	
25	Maximum credit. Enter \$7,500 (\$40,000 if the vehicle's gross vehicle weight rating (GVWR) is 14,000 pounds or more)	25	
00	, ,		
26	Enter the smaller of line 24 or line 25. Include this credit amount on line 19 in Part V		

26

4562

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service Sequence No. 179 Name(s) shown on return Business or activity to which this form relates Identifying number SHIVA MANOJ REDDY GANGULA Sch E THIMMAJIPET 844-36-0665 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1,160,000. 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 2,890,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property h Residential rental 27.5 yrs. MM S/L 08/23 104,500. 1,425. S/L 27.5 yrs. MM property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. **b** 12-year ММ S/L c 30-year 30 yrs. ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 1,425. 23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs.