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.

Submission Identification Number (SID)

Taxpayer's name	Social security number
CHANDRASEKHAR RAPARTHI	849-09-5052
Spouse's name	Spouse's social security number
LAKSHMI SINDHU TIRUMALASETTY	703-66-7607
Part I Tax Return Information – Tax Year Ending December 31, 2023 (E	nter 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	1 193,604.
2 Total tax	2 25,114.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 28,795.
4 Amount you want refunded to you	
5 Amount you owe	5

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN
		ERO firm name	

9	5	0	5	2	as mv
Ent don	asiny				

7

б

7

as mv

0

6

Enter five digits, but don't enter all zeros

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

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

Your signature

X

Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC ERO firm name

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

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

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

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature 🕨		Date 🕨	
	RO Must Retain This Form — omit This Form to the IRS Unle		
			F 0070 (D 01 0001)

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

to enter or generate my PIN

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use C	only—Do r	not write	or staple	in this :	space.
For the year Jan	. 1–Dec	e. 31, 2023, or other tax year beginning			, 2023, endi	ing			, 20	See	separ	ate ins	tructio	ons.
Your first name	and mi	iddle initial	Last n	ame						You	r socia	l secur	ity nun	nber
CHANDRAS	ЕКНИ	AR	RAP	ARTHI						84	9 (09 5	- 5052	
		s first name and middle initial	Last n							-				number
LAKSHMI	STM		TTR	UMALAS	ETTY					70	3 6	56 7	1607	
		er and street). If you have a P.O. box, see						A	Apt. no.	-				mpaign
2025 SAT	NTS	ROW, ST PAUL										e if you		
		ce. If you have a foreign address, also co	mplete	spaces be	ow.	Sta	te	ZIP c	ode			iling joi		
WYLIE						ТХ	Σ	750	98			is fund. will no		0
Foreign country	name			Foreign p	rovince/state/c	ount	iy	Foreig	n postal co			refund		ge
											Γ	You	<u> </u>	Spouse
Filing Status		Single					Head of h	ouseh	old (HOH)				-	-
Check only] Married filing jointly (even if only or	ne had	income)					, ,					
one box.		Married filing separately (MFS)					Qualifying	surviv	ing spous	se (QSS)			
	lf y	ou checked the MFS box, enter the	name	of your s	pouse. If you	ı che	ecked the HOF	l or Q	SS box, e	nter the	child'	s name	e if the)
		alifying person is a child but not you												
Divital		ny time during 2023, did you: (a) rece			h owerd or i	001/0	mont for propo	rtu or		or (b) o				
Digital Assets		ange, or otherwise dispose of a digi			•	-		-			_	Yes	XI	No
Standard		eone can claim: You as a de		· _			a dependent							
Deduction	_	Spouse itemizes on a separate return			-									
		. Were born before January 2, 1		Are bl				n befo	ore Janua	v 2, 19	59 [ls b	lind	
Dependents	s (see	instructions):		(2) 5	Social security		(3) Relationsh	ip (4	Check the	e box if c	ualifies	for (see	e instru	uctions):
If more		irst name Last name			number to you				Child ta:	< credit	Cre	edit for o	ther dep	pendents
than four	AAR	NA JABILI RAPARTHI		588	-18-013	7	Daughter		×]				
dependents,														
see instructions and check	5 ——]				
here 🗌														
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (s	ee instruc	tions)						1a	2	14,7	741.
Attach Form(s)	b	Household employee wages not re	eportec	l on Form	(s) W-2					. [1b			
W-2 here. Also	С	Tip income not reported on line 1a	(see ir	nstruction	s)	•				. [1c			
attach Forms	d	Medicaid waiver payments not rep	orted o	on Form(s	s) W-2 (see ir	nstru	ictions)			. [1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	orm 2441,	line 26 .	•				. [1e			
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8	839, 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 instructi	ions)					· ·			1h			0.
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)		•	1 i			_				
	z	Add lines 1a through 1h	• •			•				•	1z	2	14,7	741.
Attach Sch. B	2a	Tax-exempt interest	2a			b T	axable interest	t.		•	2b			
if required.	3a	Qualified dividends	3a			b 0	ordinary divide	nds .		•	3b			
Standard	4a	IRA distributions	4a			b T	axable amoun	t		•	4b			
Deduction for—	5a	Pensions and annuities	5a				axable amoun			•	5b			
Single or Married filing	6a	· · ·	6a				axable amoun	t		. I	6b			
Married filing separately,	С	If you elect to use the lump-sum el	lection	method,	check here (see	instructions)	• •						
\$13,850Married filing	7	Capital gain or (loss). Attach Scheo		•	•						7			115.
jointly or	8	Additional income from Schedule								•	8			022.
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-	our total inc	ome	θ	• •		•	9	1	93,6	504.
\$27,700 • Head of	10	Adjustments to income from Schee						• •		·	10			
household,	11	Subtract line 10 from line 9. This is	•	-	-			• •		•	11			504.
 \$20,800 If you checked Γ 	12	Standard deduction or itemized		•		'		• •		•	12		<u>27,</u>	700.
any box under Standard	13	Qualified business income deducti	ion fror	n Form 8	995 or Form	899	5-A	• •		•	13			
Deduction,	14	Add lines 12 and 13	· ·			•		• •		·	14			700.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ss, enter	-0 This is yo	our t	axable incom	ie .			15	1	65,9	904.

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

Form **1040** (2023)

attach Sch. EC. 28 28 29 Additional child tax credit from Schedule 8812 28 30 Reserved for fluture use 30 31 31 31 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 32 33 Add lines 27, 28, 29, and 31. These are your total payments 31 33 Add lines 264, 26, and 32. These are your total payments 33 34 Add lines 264, 26, and 32. These are your total payments 33 35 Add lines 264, 26, and 32. These are your total payments 34 3, 681. 36 Add lines 264, 26, and 32. These are your total payments 34 3, 681. 36 Anount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a 3, 681. 37 Subtract line 33 from line 24. This is the amount you owe. 50 16 12 1 1 1 38 Amount of line 34 you want refunded to you 2024 estimated tax 36 37 37 37 39 Do you want to allow another person to discuss this return with the IRS? See instructions 37 37 37 9 Do you want	Form 1040 (2023	3)								Page 2
18 Add lines 16 and 17 18 27, 114. 19 Child tax credit or credit for other dependents from Schedule 8812 20 20 Anount from Schedule 3, line 8 22 21 Add lines 19 and 20 22 2,000. 22 Subtract line 21 from line 18. If zero or less, enter -0 22 22,114. 23 Other taxes, including self-employment tax, from Schedule 2, line 21 23 0. 24 Add lines 22 and 23. This is your total tax 24 25,114. Payments 256 28,795. 24 4 Add lines 25 athrough 25c 256 26 27 Earned income tax withheld from 26 28,795. 28 Add lines 26, 28, 0.93. 27 28 29 American opportunity credit from Schedule 812 28 28 29 American opportunity credit from Schedule 812 28 33 28,795. 30 Reserved for future use 30 31 33 28,795. 31 Add lines 26,2,8, and 31. These are your total other payments and refundable credits 33 28,795. 34 Add lines 26,	Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	27,114.
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35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a 3,681. Direct deposit? b Routing number 0 7 2 0 0 3 2 6 c Type: Checking Savings 36 Amount of line 34 you want applied to your 2024 estimated tax 36 Amount of line 34 you want applied to your 2024 estimated tax 36 Amount You Owe 7 Subtract line 33 from line 24. This is the amount you owe. For details on how to pay, go to www.irs.gov/Payments or see instructions 37 38 Estimated tax penalty (see instructions) 38 37 Joint return? Do you want to allow another person to discuss this return with the IRS? See instructions		33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	
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See instructions. d Account number 8 0 9 2 0 1 6 2 2 1 <		35a				is attached, che	ck here	. 🗆	35a	3,681.
36 Account number o to t		b				c Type: 🛛 🗙	Checking	Savings		
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38 Estimated tax penalty (see instructions) 38 Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. No Designee's name Phone name Phone name Phone no. Personal identification no. No Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Joint return? Spouse's signature Date Your occupation EMPLOYED If the IRS sent you an Identity Protection PIN, enter it here (see inst.) Joint return? Spouse's signature. If a joint return, both must sign. Date Spouse's occupation EMPLOYED If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) Phone no. (660) 528-1498 Email address CHANDUGITAMEE@GMAIL.COM Preparer's name Preparer's name Preparer's signature Date PTIN Check if: P02470833 Self-employed Firm's name GLOBAL TAXES LLC Phone no. (678) 965-9522 Phone no. (678) 965-9522 Phone no. (678) 965-9522 Firm's address 245 ROONEY CT E BRUN		37								
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	Go to www.irs.go	ov/Form	n1040 for instructions and the late	st information.		BAA	REV 02/05/24 PRO			Form 1040 (2023)

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 2023

Attachment Sequence No. **01**

Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number C RAPARTHI & L TIRUMALASETTY 849-09-5052

Part 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. Attach Schedule E	5	-21,022.
6 Farm income or (loss). Attach Schedule F.	6	
7 Unemployment compensation	7	
8 Other income:		
a Net operating loss		
b Gambling		
c Cancellation of debt		
d Foreign earned income exclusion from Form 2555 8d ()		
e Income from Form 8853		
f Income from Form 8889		
g Alaska Permanent Fund dividends		
h Jury duty pay		
i Prizes and awards		
j Activity not engaged in for profit income		
k Stock options		
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)		
n Section 951(a) inclusion (see instructions)		
o Section 951A(a) inclusion (see instructions)		
p Section 461(I) excess business loss adjustment		
q Taxable distributions from an ABLE account (see instructions) 8q		
r Scholarship and fellowship grants not reported on Form W-2 8r		
s Nontaxable amount of Medicaid waiver payments included on Form		
1040, line 1a or 1d		
t Pension or annuity from a nonqualifed deferred compensation plan or		
a nongovernmental section 457 plan		
u Wages earned while incarcerated		
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 . Enter here and on Form	10	-21,022.
1040, 1040-SR, or 1040-NR, line 8 For Paperwork Reduction Act Notice, see your tax return instructions.	10	e 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basi			
	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			19a	
b	Recipient's SSN			
c	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:		20	
2 a	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the			
D	rental of personal property engaged in for profit			
-	Nontaxable amount of the value of Olympic and Paralympic medals		-	
С	and USOC prize money reported on line 8m			
h			-	
d			-	
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974		-	
f	Contributions to section 501(c)(18)(D) pension plans		-	
g	Contributions by certain chaplains to section 403(b) plans 24g		-	
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)		-	
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
_	tax law violations		-	
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV	02/05/24 PRO	Schedule 1 (F	orm 1040) 202

SCHEDULE	D
(Form 1040)	

Capital Gains and Losses

OMB No. 1545-0074

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

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

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

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

C RAPARTHI & L TIRUMALASETTY

Your social security number

849-09-5052

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

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

lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss fro	m	(h) Gain or (loss) Subtract column (e) from column (d) and	
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, Par line 2, column (g	t I,	combine the result with column (g)	
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.						
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	437.	551.			-114.	
2	Totals for all transactions reported on Form(s) 8949 with Box B checked						
3	Totals for all transactions reported on Form(s) 8949 with Box C checked						
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324 4	4		
5	5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1						
6	6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions						
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise		7	-114.			

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, l	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
who	e dollars.			line 2, colum	n (g)	with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	2.	3.			-1.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824	. ,	11			
12	Net long-term gain or (loss) from partnerships, S corporat	dule(s) K-1	12			
13	Capital gain distributions. See the instructions		13			
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	0	()		15	-1.

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 -115.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 both gains?	
	No. Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. 	
	☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 (115.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.	
	X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

BAA REV 02/05/24 PRO

Schedule D (Form 1040) 2023

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

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



Name(s) shown on return	Social security number or taxpayer identification number				
C RAPARTHI & L TIRUMALASETTY	849-09-5052				

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 to you on Form 1099-B

1 (a) Description of property	(b) Date acquired			(e) Cost or other basis See the Note below	If you enter an enter a co	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)			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).
COINBASE	01/01/23	12/31/23	1.	3.			-2.
ROBINHOOD SECURITIES LLC	01/02/23	12/31/23	12.	205.			-193.
ROBINHOOD CRYPTO LLC	01/01/23	12/31/23	424.	343.			81.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your ne 2 (if Box B	437.	551.			-114.

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.

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

Form 8949 (2023)						Attachr	equence No.	12A	Page	2	
											_

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side C RAPARTHI & L TIRUMALASETTY

Social security number or taxpayer identification number 849-09-5052

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

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

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

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

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

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

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

1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see <i>Column (e)</i>	Adjustment, i If you enter an enter a c See the sep (f)	(h) Gain or (loss) Subtract column (e) from column (d) and	
		(Mo., day, yr.)	(see instructions)	in the separate instructions.	Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g).
COINBASE	09/05/22	12/16/23	2.	3.			-1.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked).			2.	3.			-1.

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.

REV 02/05/24 PRO

(Form	1040)	(Fron	m rental r	eal estate, royalties, partner	rships,	S corporat	tions, es	states,	trusts, REMI	Cs, etc.)	26	23
Departm	ent of the Treasury			Attach to Form 104							Attachm	ent
	Revenue Service		Go	to www.irs.gov/ScheduleE1	for inst	ructions ar	nd the la	atest ir	formation.		Sequenc	e No. 13
. ,	shown on return										al security n	umber
	PARTHI & L									849-09	9-5052	
Part				m Rental Real Estate a			• • •			:li	م م م م ا	
				iness of renting personal prop Form 4835 on page 2, line 40		e Schedul	e C. See	einstru	cuons. Il you	are an muiv	idual, repo	ntiann
Α				2023 that would require yo		e Form(s)	1099? \$	See ins	structions .		. 🗌 Yes	s 🛛 No
				required Form(s) 1099?								
1a	Physical addr	ess of	f each pr	operty (street, city, state, Z	ZIP coc	le)						
A	1305 SHOW	BOX S	ST PFI	UGERVILLE TX 75012	2							
B				ISAKHAPATNAM ANDHE		ADESH :	IN 53	0047				
C			, .									
1b	Type of Prope	rty	2 For	each rental real estate prop	pertv lis	sted		Fa	ir Rental	Person	al Use	0.11/
	(from list below		abov	ve, report the number of fa	ir renta	l and			Days	Da		QJV
Α	2			onal use days. Check the u meet the requirements to			Α		365		0	
В	3			ified joint venture. See inst			В		365		0	
С			qua		laotion		С					
•••	of Property:							_				
	Single Family R			3 Vacation/Short-Term Re	ental	5 Land		•	Self-Rental			
2	Multi-Family Re	sidend	се	4 Commercial		6 Roya	aities	8	Other (desc	ribe)		
									Propert	ies:		
Incom							Α		В			С
3					3		15,0	00.		600.		
		ved.			4							
Exper												
5	-				5							
6 7		•		ons)	6					L,564.		
8	•				8					1,504.		
9					9							
10				fees	10							
11	-				11					L,120.		
12	•			nks, etc. (see instructions)	12		5,0)78.		,		
13					13							
14	Repairs				14					7,880.		
15	Supplies				15				8	3,570.		
16	Taxes				16							
17					17		2,5	500.	0	9,910.		
18		xpens	se or dep	pletion	18							
19 20	Other (list)			brough 10				- 7 0				
20	•			through 19	20		/,5	578.	25	9,044.		
21				rents) and/or 4 (royalties). I ions to find out if you mus								
					21		7,4	122.	-28	3,444.		
22				loss after limitation, if any			.,.					
				ons)	, 22	()	(28	,444.)	()
23a				I on line 3 for all rental prop				23a	<u>,</u>	5,600.		,
b				l on line 4 for all royalty pro		s		23b				
С			•	l on line 12 for all propertie				23c	Į	5,078.		
d				I on line 18 for all propertie				23d				
е				I on line 20 for all propertie				23e	36	5,622.		
24	Income. Add p	ositiv	/e amour	nts shown on line 21. Do n	ot inclu	ude any lo	sses			. 24		7,422.

Supplemental Income and Loss

SCHEDULE E

28,444.

-21,022.

25

26

-21,022.

OMB No. 1545-0074

SCHEDULE 8812 (Form 1040)

Department of the Treasury

Credits for Qualifying Children and Other Dependents

OMB No. 1545-0074

Attachment Sequence No. 47

6

20

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

Internal Revenue Service Name(s) shown on return

Name(s) shown on return		Your	social se	curity number
C RA	PARTHI & L TIRUMALASETTY		849-	-09-5	052
Pa	t I Child Tax Credit and Credit for Other Dependents				
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR			1	193,604.
2a	Enter income from Puerto Rico that you excluded	a			
b	Enter the amounts from lines 45 and 50 of your Form 2555	b	0.		
c	Enter the amount from line 15 of your Form 4563	c			
d	Add lines 2a through 2c			2d	0.
3	Add lines 1 and 2d			3	193,604.
4	Number of qualifying children under age 17 with the required social security number		1		
5	Multiply line 4 by \$2,000			5	2,000.
6	Number of other dependents, including any qualifying children who are not under age				
	17 or who do not have the required social security number	j l	0		
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. nation	onal, or U.S. resi	dent		
	alien. Also, do not include anyone you included on line 4.				
7	Multiply line 6 by \$500			7	
8	Add lines 5 and 7			8	2,000.
9	Enter the amount shown below for your filing status.				
	• Married filing jointly—\$400,000				
				9	400,000.
10	Subtract line 9 from line 3.				
	• If zero or less, enter -0				
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For				
	I I I I I I I I I I			10	0.
11	Multiply line 10 by 5% (0.05)			11	0.
12	Is the amount on line 8 more than the amount on line 11?			12	2,000.
	No. STOP. You cannot take the child tax credit, credit for other dependents, or addition	onal child tax ci	redit.		
	Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.				
	Yes. Subtract line 11 from line 8. Enter the result.				
13	Enter the amount from Credit Limit Worksheet A			13	27,114.
14	Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other de	pendents	•	14	2,000.
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.				
	If the amount on line 12 is more than the amount on line 14, you may be able to ta				
	on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-	-SR, or 1040-N	VR thro	ough lii	ne 27

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

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/05/24 PRO Schedule 8812 (Form 1040) 2023

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

Form	8	8	6	7
1 01111	-	-	-	-

(Rev. November 2023)

Department of the Treasury Internal Revenue Service **Paid Preparer's Due Diligence Checklist**

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC), Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. Go to www.irs.gov/Form8867 for instructions and the latest information. OMB No. 1545-0074

For tax year 20 23

Attachment	
Sequence No.	70

Taxpayer name(s) shown on return	Taxpayer identification number
C RAPARTHI & L TIRUMALASETTY	849-09-5052
Preparer's name	Preparer tax identification number
VENKATA SAI PAVAN KUMAR DUDIPALLI	P02470833

Part I Due Diligence Requirements

For Paperwork Reduction Act Notice, see separate instructions.

Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I–V for the benefit(s) claimed (check all that apply).

1	Did you complete the return based on information for the applicable tax year provided by the taxpayer	Yes	No	N/A
	or reasonably obtained by you?	X		
2	If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC			
	worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 8812 (Form 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own			
	worksheet(s) that provides the same information, and all related forms and schedules for each credit			
		X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of			
Ŭ	the following.			
	• Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to			
	determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.			
	• Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing			
	status and to figure the amount(s) of any credit(s)	X		
4	Did any information provided by the taxpayer or a third party for use in preparing the return, or			
	information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes ," answer questions 4a and 4b. If "No ," go to question 5.)		X	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent information?			
a b	Did you contemporaneously document your inquiries? (Documentation should include the questions			
b	you asked, whom you asked, when you asked, the information that was provided, and the impact the			
	information had on your preparation of the return.)			
5	Did you satisfy the record retention requirement? To meet the record retention requirement, you must			
	keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a copy of any			
	applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the			
	taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure			
	the amount(s) of the credit(s)	X		
	List those documents provided by the taxpayer, if any, that you relied on:			
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the			
•	credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her			
	return is selected for audit?	×		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year?	X		
	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)			_
а	Did you complete the required recertification Form 8862?			
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and correct Schedule C (Form 1040)?			

REV 02/05/24 PRO

Form 8867 (Rev. 11-2023)

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

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

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

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

REV 02/05/24 PRO

Form 8867 (Rev. 11-2023)