8879 Form

(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	nevenue Service				
Subm	ission Identification Number (SID)				
Taxpay	er's name	Social secu	rity numb	per	
SAT	ISH KUMAR THOTA	121-65	5-232.	5	
	's name	Spouse's so			er
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	NOOT VOIL	oro ou	thorizina	1
	Tax Return Information — Tax Year Ending December 31, 2023 (Enter whole dollars only on lines 1 through 5.	year you	are au	unonzing	.)
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1.1	20	,083.
2	Total tax		2		L,607.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		3,834.
4	Amount you want refunded to you		4		2,227.
5	Amount you owe		5		
Part		eep a co		our retu	ırn)
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)				
for any Agent payme author payme busine taxes persor	d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Uto initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated for my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the public light force.	S. Treasury cated in the on to debit the the authori uests must I processing ayment. I fu	and its of tax prepayed entry for zation. To be received the elements	designated paration so to this according revoke ved no late ectronic parking with the control of	Financial of tware for ount. This (cancel) a ter than 2 ayment of a that the
	onic Funds Withdrawal Consent. Bayer's PIN: check one box only	Г			
Taxpo		my DINI	5 2 3	3 2 5	00 m)/
	ERO firm name	, E		digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.	a	on't ente	r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am notify you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.				
Yours	signature ▶ Date ▶				
Spous	se's PIN: check one box only	_			
	I authorize to enter or generate	my PIN			as my
	ERO firm name	_	nter five	digits, but	ao my
	signature on the income tax return (original or amended) I am now authorizing.			r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am notifyou are entering your own PIN and your return is filed using the Practitioner PIN methology.				
Spous	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part					
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't er	6 0 nter all ze		7 1
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	itting this re	turn in a	accordance	I am now e with the
ERO's	s signature ► Date ►				
	FRO Must Retain This Form — See Instructions				

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

20**23** OMB No. 1545-0074

						0.11.2 1101 1010		o, D	0 1101 111	ne er etapre in time epacer	
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20	Se	ee sep	parate instructions.	
Your first name	and m	iddle initial	Last na	ame				Yo	Your social security number		
SATISH 1	KUMAI	R	THO!	ΤΑ				1	L21	65 2325	
-		s first name and middle initial	Last na							s social security number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.			Apt. no.	Pr	esider	ntial Election Campaign	
23040 BI	ROOK	SBANK SQUARE								nere if you, or your	
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Stat	te	ZIP code		spouse if filing jointly, wa to go to this fund. Check		
ASHBURN					VA		20148			ow will not change	
Foreign countr	y name			Foreign province/state/o	y	Foreign postal c	oreign postal code your tax or refun				
										You Spouse	
Filing Status	s X	Single									
Check only		Married filing jointly (even if only o	ne had	income)		_					
one box.		Married filing separately (MFS)	SS)								
		ou checked the MFS box, enter the	ne chil	d's name if the							
	qu	alifying person is a child but not you	ır depe	ndent:							
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	s a reward, award, or	paym	nent for prope	rty or services); or (b)	sell,		
Assets	exch	nange, or otherwise dispose of a digi	ital ass	et (or a financial intere	est in	a digital asse	et)? (See instru	ctions.))	🗌 Yes 🛛 No	
Standard	Som	neone can claim:	pender	nt Your spouse	e as a	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	u were a dual-status	alien						
Age/Blindnes	e Vou	: Were born before January 2, 1	050	Are blind Spo	ouse:	□ Was hor	rn before Janua	any 2 1	050	☐ Is blind	
			555	-			(A) Chook t			fies for (see instructions):	
Dependent		irst name Last name		(2) Social security number	'	(3) Relationsh to you	iib I.,	ax credi		Credit for other dependents	
If more than four	(1)	Last Harris								П	
dependents,											
see instruction	s										
and check here []							_			
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	ee instructions)				- -	1a	32,083.	
	b	Household employee wages not re	eportec	d on Form(s) W-2					1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	1c								
attach Forms	d	Medicaid waiver payments not rep	orted o	on Form(s) W-2 (see in	nstru	ctions)			1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	from Fo	orm 2441, line 26					1e		
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8839, 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	ions)						1h	0.	
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)		<u>1</u> i					
	Z	Add lines 1a through 1h	. ;						1z	32,083.	
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest	t		2b		
if required.	3a		3a			rdinary divide			3b		
Standard	4a		4a			axable amoun			4b		
Deduction for—	5a		5a			axable amoun			5b		
Single or Married filing	6a	,	6a			axable amoun	t		6b	_	
separately,	_ c	If you elect to use the lump-sum e		•	`	,		. 📙		2 000	
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche						. Ц	7	-3,000.	
jointly or Qualifying	8	Additional income from Schedule							8	20.002	
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							9	29,083.	
Head of	10	Adjustments to income from Sche							10	+	
household, \$20,800	11	Subtract line 10 from line 9. This is	-						11	29,083.	
If you checked	12	Standard deduction or itemized				 5_Λ			12	,	
any box under Standard	13 14	Qualified business income deduction Add lines 12 and 13	ioii iror	III I-OIIII OSSO OI FORM	1 0998	J-A			13		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	on or los		 (OUr t	 avahle incom			15		
			0 01 16	55, 5111515 y	Jui L				13	1 10,400.	

Form 1040 (2023	3)			Page
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	1,607.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	1,607.
	19	Child tax credit or credit for other dependents from Schedule 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	1,607.
	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	1,607.
Payments	25	Federal income tax withheld from:		
	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	3,834.
If you have a qualifying child, attach Sch. EIC.	26	2023 estimated tax payments and amount applied from 2022 return	26	
	27	Earned income credit (EIC)		
	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	3,834.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,227.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	2,227.
Direct deposit?	b	Routing number 0 1 1 9 0 0 2 5 4 c Type: X Checking Savings		
See instructions.	d	Account number 3 8 5 0 2 1 3 9 9 2 9 5		
	36	Amount of line 34 you want applied to your 2024 estimated tax		
Amount	37	Subtract line 33 from line 24. This is the amount you owe .		
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
Third Party Designee		you want to allow another person to discuss this return with the IRS? See tructions	nelow	⊠ No
Designee		signee's Phone Personal identif		es Ho
	nar	9	ioalion	

Joint return? See instructions. Keep a copy for your records. Spouse's signature. If a joint return, both must sign.

Date

Software Engineer

Software

Paid Preparer – Use Only –

SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/06/2024 P02082703 Self-employed Firm's name GLOBAL TAXES LLC Phone no. (678) 965-9522 Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN 84-3171965

Preparer's signature

Preparer's name

PTIN

Date

Check if:

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service

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.

Name(s) shown on return Your social security number 121-65-2325 SATISH KUMAR THOTA

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. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (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) (or other basis) Form(s) 8949, Part I, combine the result 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 16. -15. 1. 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 -2,295. 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 251.) 6 7 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 -2,561. 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 (g) (h) Gain or (loss) 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 (sales price) (or other basis) Form(s) 8949, Part II, 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 . . 8b Totals for all transactions reported on Form(s) 8949 with 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 2439 and 6252; and long-term gain or (loss) 11 -3,443.12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III -3,443.15

Page 2 Schedule D (Form 1040) 2023

Part III Summary

16	Combine lines 7 and 15 and enter the result	16	-	-6,004.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.			
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.			
17	Are lines 15 and 16 both gains? Yes. Go to line 18. 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	(3,000.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.			
	➤ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			
	RΔΔ REV 03/07/24 PRO	Scl	nedule D (For	m 1040) 2023

Sales and Other Dispositions of Capital Assets

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return SATISH KUMAR

THOTA

Social security number or taxpayer identification number

121-65-2325

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.

	A) Short-term transactions B) Short-term transactions C) Short-term transactions	reported on	Form(s) 1099	9-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 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)	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).
Apex	Clearing	01/01/23	12/31/23	1.	16.			-15.
neg Sch	als. Add the amounts in columns ative amounts). Enter each tota edule D, line 1b (if Box A above ve is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your ne 2 (if Box B	1.	16.			-15.

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.

Department of the Treasury Internal Revenue Service

Gains and Losses From Section 1256 Contracts and Straddles

Attach to your tax return. Go to www.irs.gov/Form6781 for the latest information. OMB No. 1545-0644

Attachment Sequence No. 82

Name(s) shown on tax return										1	dentify	ing number
SAT	ISH KUMAR THOTA											121-	65-2325
		_	straddle ele					C [addle ac		
		Straddle			atior	n electi	ion I	D	Net se	ectio	on 1256 o	contra	cts loss election
Part	Section 1256 Contract	cts Marke	d to Mari	ket									
		ication of acc					(b)) (L	oss)		(c) Gain	l	
	Form 1099-B Webull Fi		LLC						-605.				
	Form 1099-B Apex Clea	ring						-5	,133.				
2	Add the amounts on line 1 in o	columns (b)	and (c) .			2	(5,	738.)				
3	Net gain or (loss). Combine lin	e 2, columr	ns (b) and (c)								3	-5 , 738.
4	Form 1099-B adjustments. Se	e instructio	ns and atta	ach statem	ent							4	
5	Combine lines 3 and 4				•							5	-5,738.
	Note: If line 5 shows a net gain see instructions.	ı, skip line 6	and enter	the gain on	ı line	7. Par	tnership	ps	and S co	orpo	rations,		
6	If you have a net section 1256									t of	loss to	_	_
_	be carried back. Enter the loss	s as a positi	ive numbei	r. If you did	n't c	heck b	ox D, e	ent	er -0-			6	0.
7	Combine lines 5 and 6					 						7	-5,738.
8	Schedule D or on Form 8949.	See instruc	tions									8	-2,295.
9	Long-term capital gain or (lo Schedule D or on Form 8949.	See instruc	tions .	·	<u>.</u>							9	-3,443.
Part			dles. Attac	h a separa	te st	ateme	nt listin	ıg e	ach stra	ddle	e and its	comp	onents.
Secti	on A—Losses From Strado	lles	1					_					
	or acquired or sold plus expense of sale plus expense of sale Otherwise								(g) Unrecognized gain on offsetting positions		(h) Recognized loss. If column (f) is more than (g), enter difference. Otherwise, enter -0		
10													
11a	Enter the short-term portion o D or on Form 8949. See instru		m line 10,	column (h),	, her	e and i	nclude	e or	n line 4 c	of So	chedule	11a	()
b	Enter the long-term portion of	losses from	n line 10, c	olumn (h),	here	and in	clude o	on	line 11 c	of Sc	chedule		,
	D or on Form 8949. See instru											11b	()
Secti	on B—Gains From Straddle	es											
	(a) Description of prop	erty		(b) Date entered into or acquired	clos	Date sed out sold			ross price		(e) Cost of other base plus exper of sale	is	(f) Gain. If column (d) is more than (e), enter difference. Otherwise, enter -0
12													
										<u> </u>			
13a	Enter the short-term portion o or on Form 8949. See instruct	ions										13a	
b	Enter the long-term portion of D or on Form 8949. See instru	ctions										13b	
Part	Unrecognized Gains	From Pos	itions He	ld on Las	t Da	ay of T	Tax Ye	ear	. Memo	enti	y only (s	ee ins	tructions)
	(a) Description o			(b) Date acquired (c) Fair market value on last business day of tax year			(d) Cost of other bas as adjusted	is	(e) Unrecognized gain. If column (c) is more than (d), enter difference. Otherwise, enter -0				
14													
					I		I			1			

2023 VA760CG Page 1





SATISH KUMAR THOTA

23040 BROOKSBANK SQUARE

ASHBURN VA 20148

SSN-You THOT		121652325	Vendor ID	1555	XX	ххх
SSN - Spouse						
Fed Adj Gross Income (FAGI)	1.	29083.	Withholding (VA) - Yo	u	19A.	1546.
Additions	2.		Withholding (VA) - Sp	ouse	19B.	
Subtotal	3.	29083.	Estimated Payments		20.	
Age Deduction - You	4A.		2022 Overpayment		21.	
Age Deduction - Spouse	4B.		Extension Payments		22.	
Soc Sec & Tier 1 Railroad	5.		Credit - Low-Income of	or EIC	23.	
State Income Tax Overpayment	6.		Credit - Schedule OSC)	24.	
Subtractions	7.		Credits - Schedule CR	1	25.	
Subtotal Subtractions	8.		Total Payments / Cred	dits	26.	1546.
Total VA Adj Gross Income (VAGI)	9.	29083.	Tax You Owe		27.	
Itemized Deductions - VA Sch A	10.		Tax Overpayment		28.	645.
Standard Deduction	11.	8000.	Overpayment Credited	d to Next Year	29.	
Exemptions	12.	930.	VAC - Virginia 529 / A	BLE	30.	
Deductions	13.		VAC - Other Contribut	tions	31.	
Subtotal (Deductions & Exemptions)) 14.	8930.	Addition to Tax, Penal	ty & Interest	32.	
VA Taxable Income	15.	20153.	Sales and Use Tax		33.	
Amount of Tax	16.	901.	Amount You Owe	0 17		
Spouse Tax Adjustment (STA)	17.		Will Pay by Credit/Debit Your Refund	Card N	1	645.
VAGI - Spouse	17A.		Donk Donking #		_	011000254
Net Amount of Tax	18.	901.	Bank Routing #	(011900254
L			Bank Account #		3850213	IJIJ <u>᠘</u> IJIJ
		LARI	DLARDTD _	LTD \$		Page 1 of 2





Г											
Filing Status, Ag	e & License I	nformation				Addition	nal Filing Info	rmation			
Filing Status				1		Locality		107			
Federal Head o	f Household					Uninsured & Authorize DMAS					
DOB - You		051	3199	2		Name or Filing Status Change					
VA Driver's Lice	ense ID - You					Address Change					
VA Driver's Lice	ense - Iss. Date	- You				VA Return Not Filed Last \	Year				
Spouse Name ((Filing Status 3	Only)				Dependent on Another's R	Return				
						Farmer / Fisherman / Mero	chant Seaman				
DOB - Spouse	15. 0					Amended					
VA Driver's Lice	·					Reason Code					
VA Driver's Lice	ense - Iss. Date	·				Overseas on Due Date					
You You	1	Exemptions (B) 65 & Over - You				Federal EIC & Amount					
Spouse		65 & Over - Spouse				Deceased Indicator					
Dependents		Blind - You				Form 760C or 760F					
Total (A)	1	Blind - Spouse				No Sales & Use Tax Due	Indicator	X			
		Total (B)				Obtain Electronic 1099G					
						ID Theft PIN					
								etum. If you are requesting direct ljurisdiction of the United States.			
Signature - You			Date		Pho	one - You		2033924590			
Signature - Spouse			Date		Pho	one - Spouse					
Signature - Prepare	r <u>SYAM PRIY</u>	A RAM SAGAR GUPTA	Date	040624	Pho	one - Preparer		6789659522			
The Tax Departmen	t may discuss r	ny/our return with my/our p	reparer.		Pre	parer Information	7	P02082703			

GLOBAL TAXES LLC

NJ 08816

Page 2 of 2

245 ROONEY CT

E BRUNSWICK

File by May 1, 2024 Include Page 1, Page 2 and all

supporting 760CG documents.

2023 Schedule INC/CG

121652325

Report all W-2s, 1099s & VK-1s with VA Withholding

SATISH KUMAR THOTA



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Γ					⊣
121652325	M	1546.	824984126	30824984126F001	32083.

Total VA Withholding	SSN	VA Withholding
You	121652325	1546.
Spouse		
Total # of W-2s,1099s & VK-1s	01	

VA-8879 Virginia Department of Taxation

Virginia Submission Identification Number (SID)

Virginia Individual Income Tax e-File Signature Authorization

Tax Year 2023

DO NOT SEND THIS VA-8879 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

You			MAD	mii (mλ													7		ecurity Number		
		н ки 's Nan		THO	TA													121-65-2325 A Spouse's Social Security Number				
'																		1		,		
Par	t I	Tax	Retu	ırn Info	orma	tion												A S	pouse	B Yourself		
1.	F	ederal	Adjuste	ed Gross	s Incor	me (For	m 760C	G, Line	1; 760	PY, L	ine 1, co	lumns	A & B	; For	rm 763, L	Line 1)				29083		
2.	2. Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)																					
3.																						
4.																						
5.	V	/ithholo	ling (Fo	orm 760	CG, Li	ne 19a	& 19b; 7	760PY,	Lines 1	19a &	19b; For	m 763	, Lines	19a	a & 19b)					1546		
6.																						
7.	R		'	760CG,																645		
Par											ization									ents for the year ending		
filing liable Virging refund of the signa	Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security number or individual tax identification number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If I am filing a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Provider to transmit my complete return to Virginia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, the direct deposit of my refund or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program. Taxpayer's e-File PIN: check one box only I authorize the ERO named below to enter my e-File PIN 5 2 3 2 3 2 5 as my signature on my 2023 e-filed Virginia individual income tax return.																					
	_	GLOB	AL :	raxes	LL	C							nter all		ros	-						
													n Nam									
															return. (art III bel		this box	only if you	are enterin	ng your own e-File		
	•	nature													D	ate _						
Spor	use'	's e-Fil	e PIN:	check o	one bo	x only			_													
	L	authori	ze the	ERO na	med b	elow to	enter m	ny e-File	PIN		Do no	t ente	•	-		n my 20	023 e-file	ed Virginia	individual ir	ncome tax return.		
	1.	النب	0 2 2001	. File DII	N aa n			m., 200)) o filo	d \ /:			Name		, noti ino (Chaal	this hav	anly if you	ara antarin	an vous ours o File		
Ш															art III bel	low.		only II you	are enterm	ng your own e-File		
		s Signa														Date						
Par	t III	Cer	tifica	tion ar	nd A	uthen	ticatio	n – Pr	actiti	oner	PIN M	etho	d Onl	ly							4	
ERO	's E	FIN/PI	N: Ent	er your	six-dig	it EFIN	followed	d by you	ur five d	ligit se	elf-selecte	ed PIN	1. 2	2 2	2 2 4	4 9	6 0	8 2 .	7 1			
indica Hand a sig	Do not enter all zeros I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2023 Virginia individual income tax return 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 Virginia's publication Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2023). EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.																					
ERO	's S	ignatur	е												[Date _	04-0	6-24				

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

20**23** OMB No. 1545-0074

						0.11.2 1101 1010		o, D	0 1101 111	ne er etapre in time epacer	
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20	Se	ee sep	parate instructions.	
Your first name	and m	iddle initial	Last na	ame				Yo	Your social security number		
SATISH 1	KUMAI	R	THO!	ΤΑ				1	L21	65 2325	
-		s first name and middle initial	Last na							s social security number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.			Apt. no.	Pr	esider	ntial Election Campaign	
23040 BI	ROOK	SBANK SQUARE								nere if you, or your	
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Stat	te	ZIP code		spouse if filing jointly, wa to go to this fund. Check		
ASHBURN					VA		20148			ow will not change	
Foreign countr	y name			Foreign province/state/o	y	Foreign postal c	oreign postal code your tax or refun				
										You Spouse	
Filing Status	s X	Single									
Check only		Married filing jointly (even if only o	ne had	income)		_					
one box.		Married filing separately (MFS)	SS)								
		ou checked the MFS box, enter the	ne chil	d's name if the							
	qu	alifying person is a child but not you	ır depe	ndent:							
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	s a reward, award, or	paym	nent for prope	rty or services); or (b)	sell,		
Assets	exch	nange, or otherwise dispose of a digi	ital ass	et (or a financial intere	est in	a digital asse	et)? (See instru	ctions.))	🗌 Yes 🛛 No	
Standard	Som	neone can claim:	pender	nt Your spouse	e as a	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	u were a dual-status	alien						
Age/Blindnes	e Vou	: Were born before January 2, 1	050	Are blind Spo	ouse:	□ Was hor	rn before Janua	any 2 1	050	☐ Is blind	
			555	-			(A) Chook t			fies for (see instructions):	
Dependent		irst name Last name		(2) Social security number	'	(3) Relationsh to you	iib I.,	ax credi		Credit for other dependents	
If more than four	(1)	Last Harris								П	
dependents,											
see instruction	s										
and check here []							_			
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	ee instructions)				- -	1a	32,083.	
	b	Household employee wages not re	eportec	d on Form(s) W-2					1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	1c								
attach Forms	d	Medicaid waiver payments not rep	orted o	on Form(s) W-2 (see in	nstru	ctions)			1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	from Fo	orm 2441, line 26					1e		
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8839, 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	ions)						1h	0.	
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)		<u>1</u> i					
	Z	Add lines 1a through 1h	. ;						1z	32,083.	
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest	t		2b		
if required.	3a		3a			rdinary divide			3b		
Standard	4a		4a			axable amoun			4b		
Deduction for—	5a		5a			axable amoun			5b		
Single or Married filing	6a	,	6a			axable amoun	t		6b	_	
separately,	_ c	If you elect to use the lump-sum e		•	`	,		. 📙		2 000	
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche						. Ц	7	-3,000.	
jointly or Qualifying	8	Additional income from Schedule							8	20.002	
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							9	29,083.	
Head of	10	Adjustments to income from Sche							10	+	
household, \$20,800	11	Subtract line 10 from line 9. This is	-						11	29,083.	
If you checked	12	Standard deduction or itemized				 5_Λ			12	,	
any box under Standard	13 14	Qualified business income deduction Add lines 12 and 13	ioii iror	III I-OIIII OSSO OI FORM	1 0998	J-A			13		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	on or los		 (OUr t	 avahle incom			15		
			0 01 16	55, 5111515 y	Jui L				13	1 10,400.	

Form 1040 (2023	3)			Page
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	1,607.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	1,607.
	19	Child tax credit or credit for other dependents from Schedule 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	1,607.
	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	1,607.
Payments	25	Federal income tax withheld from:		
	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	3,834.
you have a	26	2023 estimated tax payments and amount applied from 2022 return	26	
ualifying child, ttach Sch. EIC.	27	Earned income credit (EIC)		
illacii Scii. Elc.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	3,834.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,227.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	2,227.
Direct deposit?	b	Routing number 0 1 1 9 0 0 2 5 4 c Type: X Checking Savings		
See instructions.	d	Account number 3 8 5 0 2 1 3 9 9 2 9 5		
	36	Amount of line 34 you want applied to your 2024 estimated tax 36		
Amount	37	Subtract line 33 from line 24. This is the amount you owe .		
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
Third Party Designee		you want to allow another person to discuss this return with the IRS? See structions	oelow.	X No
Dodgilee		signee's Phone Personal identif		
	nar	9 ****		

Joint return? See instructions. Keep a copy for your records. Spouse's signature. If a joint return, both must sign.

Date

Software Engineer

Software

Paid Preparer – Use Only –

SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/06/2024 P02082703 Self-employed Firm's name GLOBAL TAXES LLC Phone no. (678) 965-9522 Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN 84-3171965

Preparer's signature

Preparer's name

PTIN

Date

Check if:

SCHEDULE D (Form 1040)

Capital Gains and Losses

2023

OMB No. 1545-0074

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service 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.

Name(s) shown on return

SATISH KUMAR THOTA

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

Your social security number
121-65-2325

No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

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. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (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) (or other basis) Form(s) 8949, Part I, combine the result 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 16. -15. 1. 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 -2,295. 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 251.) 6 7 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 -2,561. 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 (g) (h) Gain or (loss) 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 (sales price) (or other basis) Form(s) 8949, Part II, 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 . . 8b Totals for all transactions reported on Form(s) 8949 with 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 2439 and 6252; and long-term gain or (loss) 11 -3,443.12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III -3,443.15

Page 2 Schedule D (Form 1040) 2023

Part III Summary

16	Combine lines 7 and 15 and enter the result	16	-	-6,004.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.			
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.			
17	Are lines 15 and 16 both gains? Yes. Go to line 18. 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	(3,000.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.			
	➤ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			
	RΔΔ REV 03/07/24 PRO	Scl	nedule D (For	m 1040) 2023

Sales and Other Dispositions of Capital Assets

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return SATISH KUMAR

THOTA

Social security number or taxpayer identification number

121-65-2325

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	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate instructions.			Gain or (loss) Subtract column (e)		
	(Example: 100 sh. XYZ Co.)					(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).		
Apex	Clearing	01/01/23	12/31/23	1.	16.			-15.		
neg Sch	als. Add the amounts in columns ative amounts). Enter each tota edule D, line 1b (if Box A above ve is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your ne 2 (if Box B	1.	16.			-15.		

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.

6781 **678**1

Department of the Treasury Internal Revenue Service

Gains and Losses From Section 1256 Contracts and Straddles

Attach to your tax return.

Go to www.irs.gov/Form6781 for the latest information.

OMB No. 1545-0644

2023
Attachment Sequence No. 82

Name(s) shown on tax return Identifying number SATISH KUMAR THOTA 121-65-2325 Check all applicable boxes. A ☐ Mixed straddle election **C** Mixed straddle account election See instructions. **D** ☐ Net section 1256 contracts loss election **B** Straddle-by-straddle identification election Part I **Section 1256 Contracts Marked to Market** (a) Identification of account (b) (Loss) (c) Gain Form 1099-B Webull Financial LLC -605. Form 1099-B Apex Clearing -5,133. 2 Add the amounts on line 1 in columns (b) and (c) 5,738. 3 Net gain or (loss). Combine line 2, columns (b) and (c) 3 -5,738. Form 1099-B adjustments. See instructions and attach statement . . . 4 4 5 Combine lines 3 and 4 5 -5,738. Note: If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions. If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to 6 be carried back. Enter the loss as a positive number. If you didn't check box D, enter -0- 6 7 7 738. Short-term capital gain or (loss). Multiply line 7 by 40% (0.40). Enter here and include on line 4 of 8 -2,295. Long-term capital gain or (loss). Multiply line 7 by 60% (0.60). Enter here and include on line 11 of -3,443. Gains and Losses From Straddles. Attach a separate statement listing each straddle and its components. Part II Section A-Losses From Straddles (f) Loss. (a) Description of property (b) Date (c) Date (d) Gross (e) Cost or (h) Recognized loss. (g) If column (e) is entered into closed out sales price other basis Unrecognized If column (f) is more than (d), or acquired or sold plus expense gain on more than (g), enter difference. offsetting enter difference. of sale Otherwise, Otherwise, enter -0-. positions enter -0-. 10 Enter the short-term portion of losses from line 10, column (h), here and include on line 4 of Schedule 11a (Enter the long-term portion of losses from line 10, column (h), here and include on line 11 of Schedule 11b (Section B-Gains From Straddles (f) Gain. (a) Description of property (b) Date (c) Date (d) Gross (e) Cost or If column (d) is entered into closed out sales price other basis more than (e), or acquired or sold plus expense enter difference. of sale Otherwise, enter -0-. 12 Enter the short-term portion of gains from line 12, column (f), here and include on line 4 of Schedule D 13a 13a Enter the long-term portion of gains from line 12, column (f), here and include on line 11 of Schedule 13b Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo entry only (see instructions) Part III (e) Unrecognized (a) Description of property (b) Date (c) Fair market (d) Cost or gain. If column (c) value on last other basis acquired is more than (d), business day as adjusted enter difference. of tax year Otherwise, enter -0-. 14