(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

	5				
Submis	ssion Identification Number (SID)				
Taxpayer	's name	Social securi	ty numl	per	
MOHA	N TEJA GORANTLA	808-09	-222	6	
Spouse's	name	Spouse's so	ial secu	urity number	
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	Wear your	ro au	thorizing	<u> </u>
	hole dollars only on lines 1 through 5.	year you a	iie au	uionzing.	)
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1	71	,950.
	Total tax		2		,095.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,115.
4	Amount you want refunded to you		4		,020.
5	Amount you owe		5		
Part I	Taxpayer Declaration and Signature Authorization (Be sure you get and I	keep a cop	y of y	our retu	rn)
return (of to send for any of Agent to paymen authoriz paymen business taxes to personal	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate to the transport of the payment (settlement) date. I also authorize the financial institutions involved in the preceive confidential information necessary to answer inquiries and resolve issues related to the preceive that the latest of the process of the transport of the payment (PIN) below is my signature for the income tax return (original or amended) I and the transport of the process of t	itter, or electrection of the testion of the test. Treasury acated in the test to debit the the authorizates must be processing of ayment. I fur	onic refransmisend its control of the control of th	turn originarssion, (b) the designated paration softo this according to the designation of the designation o	tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 hyment of that the
	ic Funds Withdrawal Consent. /er's PIN: check one box only				
X	l authorize GLOBAL TAXES LLC to enter or generate	my PIN 9	2 2	2 2 6	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Er		digits, but er all zeros	asiny
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.				
Your si	gnature ▶ Date ▶ _				
Snous	e's PIN: check one box only				
Opous	I authorize to enter or generate	my DINI			as my
Ш	ERO firm name	_	ter five	digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.				
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part I	I Certification and Authentication — Practitioner PIN Method Only				
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9	6 0	8 2 7	1
		Don't en	er dii Ze	5100	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of In	itting this ret	urn in a	accordance	
ERO's	signature ► Date ►				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To I	o So			

# E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



For the year Jan. 1–Dec. 31, 2023, or other tax year beginning				, 2023, ending				, 20 S			See separate instructions.		
Your first name and middle initial				Last name					Yo	Your social security number			
MOHAN TE	EJA		GORANTLA						8	308	09 2	226	
		s first name and middle initial	Last na						-			curity number	
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Apt. no	).	Pr	eside	ntial Election	on Campaign	
777 NOR	гн А:	IR DEPOT BOULEVARD					7214	1	- 1		nere if you,	•	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	State	е	ZIP code					tly, want \$3 Checking a	
MIDWEST	CIT	Y			OK		73110		- 1	0	ow will not		
Foreign country	y name			Foreign province/state/o	county	<i>'</i>	Foreign pos	tal cod	de yo	our tax	or refund.	_	
											You	Spouse	
Filing Status	; X	Single			[	Head of ho	ousehold (l	HOH)					
Check only		Married filing jointly (even if only or	ne had	income)									
one box.		Married filing separately (MFS)			[	Qualifying	surviving s	pous	se (QS	SS)			
	If y	ou checked the MFS box, enter the	name (	of your spouse. If you	u che	cked the HOH	or QSS be	ox, er	nter th	ne chi	ld's name	if the	
	qu	alifying person is a child but not you	ır depei	ndent:									
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	pavm	ent for prope	rtv or servi	ces):	or (b)	sell.			
Assets		nange, or otherwise dispose of a digi					-				☐ Yes	⊠ No	
Standard	Som	eone can claim: You as a de	penden	t Your spouse	e as a	dependent							
Deduction		Spouse itemizes on a separate returi	n or you	u were a dual-status	alien	•							
Ago/Blindnes	- Vau	: Were born before January 2, 19	050 [	Are blind Spo		□ Was bor	n before Ja	nuar	w 2 1	050	☐ Is bli	ind	
	_		9J9 [	T .	ouse:		(4) Ob a					instructions):	
Dependent		instructions): irst name Last name		(2) Social security number	'	(3) Relationsh to you	iP		x credi		-	her dependents	
If more than four	(1)	Lastrianie		110111001		,			7	-	1		
dependents,									<u>.                                    </u>			╡──	
see instruction	s —								1			╡──	
and check here	1								1			╡──	
-	1a	Total amount from Form(s) W-2, bo	ox 1 (se	ee instructions)						1a	T 8	34 <b>,</b> 797.	
Income	b	Household employee wages not re	`	,					·	1b		, -,	
Attach Form(s) W-2 here. Also	c	Tip income not reported on line 1a (see instructions)								1c			
attach Forms	d									1d			
W-2G and	e									1e			
1099-R if tax was withheld.	f	•	Employer-provided adoption benefits from Form 8839, line 29							1f			
If you did not	g	Wages from Form 8919, line 6.								1g			
get a Form	h	Other earned income (see instructi	ons)							1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		1i							
	z	Add lines 1a through 1h								1z	3	34 <b>,</b> 797.	
Attach Sch. B	2a	Tax-exempt interest	2a		<b>b</b> Ta	xable interest	i			2b		84.	
if required.	3a	Qualified dividends	3a		<b>b</b> Or	dinary divider	nds			3b			
	4a	IRA distributions	4a		<b>b</b> Ta	xable amount	t			4b			
Standard Deduction for—	5a	Pensions and annuities	5а		<b>b</b> Ta	xable amoun	t			5b			
Single or	6a	Social security benefits	6a		<b>b</b> Ta	xable amount	t			6b			
Married filing separately,	С	If you elect to use the lump-sum el		,	`	,							
\$13,850 Married filing	7	Capital gain or (loss). Attach Scheo	dule D i	if required. If not requ	uired,	check here				7		8 <b>,</b> 773.	
jointly or	8	Additional income from Schedule	1, line 1	0						8		21,704.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•	come					9	1 7	71,950.	
\$27,700 • Head of	10	Adjustments to income from Sche								10			
household,	11	Subtract line 10 from line 9. This is	-							11		71,950.	
\$20,800 If you checked	12	Standard deduction or itemized		•	,					12		13,850.	
any box under Standard	13	Qualified business income deducti		n Form 8995 or Form	8995	5-A				13			
Deduction,	14	Add lines 12 and 13								14		13,850.	
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income								15	[	58,100.	

Form 1040 (202)	3)								Page Z
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	8,095.
Credits	17	Amount from Schedule 2, lir		17					
	18	Add lines 16 and 17						18	8,095.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0				22	8,095.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	8,095.
<b>Payments</b>	25	Federal income tax withheld	I from:						
_	а	Form(s) W-2				<b>25a</b> 11	,115.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	11,115.
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			
allach Sch. ElC.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit from Form 8863, line 8 29							
	30	Reserved for future use .							
	31	Amount from Schedule 3, lin							
	32	Add lines 27, 28, 29, and 31. These are your <b>total other payments and refundable credits</b>							
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	11,115.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amoun	t you <b>overpaid</b>		34	3,020.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	k here		35a	3,020.
Direct deposit?	b	Routing number 0 7 1							
See instructions.	d	Account number 1 1 6 3 8 7 5 6 1							
	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		,	•			_	omplete l	oelow.	<b>⋈</b> No
		esignee's		Phone Personal ide					
		name no. number (PIN)  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to							
Sign		lief, they are true, correct, and com							
Here		ur signature	•	Date	Your occupation			nt you an Identity	
	10	ur signature		Date	Tour occupation			IN, enter it here	
Joint return?					IT EMPLOYE	(see	see inst.)		
See instructions.		ouse's signature. If a joint return,	<b>both</b> must sign.	Date	Spouse's occupation	on			nt your spouse an
Keep a copy for your records.		•					tity Proto inst.)	ection PIN, enter it here	
	Ph	one no. (618) 353-483	3	Email address	MOHANTEJA.	rm@gmail.co	M		
Paid	Pr	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/05/2024	P0208	2703	Self-employed
Preparer	Fir	Firm's name GLOBAL TAXES LLC PI					Pho	ne no.	(678) 965-9522
Use Only							's EIN	84-3171965	

# SCHEDULE 1 (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023

Attachment

Department of the Treasury Internal Revenue Service

MOHAN TEJA

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

GORANTLA

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

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

	Sequence No. <b>01</b>
Your soc	ial security number
808-09	-2226

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 E .	5	-21,704.
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		
ı	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	4	
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	4	
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (	4	
t	Pension or annuity from a nonqualifed deferred compensation plan or	01		
	a nongovernmental section 457 plan	8t		
u -	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	8z		
9	Total other income. Add lines 8a through 8z		9	
9 10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter		9	
.0	1040, 1040-SR, or 1040-NR, line 8	noie and on rolli	10	-21,704.
				,

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	-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
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	041			
	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	04:			
	Housing deduction from Form 2555	24i 24j		-	
J I	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24j		-	
k		24k			
_	1041)	24K			
Z		24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b>			23	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		23/24 PRO		le 1 (Form 1040) 2023
	BAA	1\L'V UZ/	LUIZA FINO		

#### 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 Your social security number Name(s) shown on return 808-09-2226 MOHAN TEJA GORANTLA 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 (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (g) line 2. 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 53,027. 44,310. 134. 8,851. Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 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 8,851. 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 (or other basis) Form(s) 8949, Part II, (sales price) 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 1,500. 1,422. -78. Totals for all transactions reported on Form(s) 8949 with **Box E** checked . . . . . . . . . . . . . . . . 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 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

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

14

15

Schedule D (Form 1040) 2023 Page 2

#### Part III **Summary** 8,773. 16 Combine lines 7 and 15 and enter the result 16 • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet . . . . . . . . . . . . . . . . . . 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ 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 gualified 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.

# Form **8949**

### **Sales and Other Dispositions of Capital Assets**

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

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

OMB No. 1545-0074

2023

Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

808-09-2226

MOHAN TEJA GORANTLA

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)

<ul><li>☐ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>			-	sis <b>wasn't</b> report	ed to the IF	RS	
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an a	any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/23	12/31/23	4,671.	3,592.			1,079.
APEX CLEARING	04/24/23	07/26/23	48,356.	40,718.	W	134.	7,772.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above to specied) or line 3 (if Box A above to	al here and inc e is checked), <b>li</b> i	lude on your ne 2 (if Box B	53 027	44 310		134	g 851

**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 MOHAN TEJA GORANTLA

Social security number or taxpayer identification number 808-09-2226

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.

<ul><li>✗ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on	Form(s) 1099	-B showing bas				9)
1  (a) Description of property	(b)	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> 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.)	Date acquired (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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/22	12/31/23	1,422.	1,500.			-78.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	1,422.	1,500.			-78.

**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)

Department of the Treasury

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

Attachment Sequence No. 13

OMB No. 1545-0074

Internal Revenue Service

Name(s	shown on return						Your soci	al security	number
MOHA	N TEJA GORANTLA						808-0	9-2226	
Part									
	<b>Note:</b> If you are in the business of renting personal proper rental income or loss from <b>Form 4835</b> on page 2, line 40.	ty, use	Schedule	C. See	instruc	tions. If you a	are an indi	vidual, rep	ort farm
Α [	Did you make any payments in 2023 that would require you	to file	Form(s) 1	0992.5	ee ins	tructions		□ Ye	es X No
	f "Yes," did you or will you file required Form(s) 1099?								
	Physical address of each property (street, city, state, ZII								
A	HS 33A, A.SIVRAMPURAM NANDAYL ANDHRA H	PRADF	SH TN	5185	93				
B	ne sen, mentani etan mashir menini i			0100.					
С									
1b	Type of Property 2 For each rental real estate prope	erty list	ed		Fai	r Rental	Persor	nal Use	O IV
	(from list below) above, report the number of fair					Days	Da	ays	QJV
Α	gersonal use days. Check the Quif you meet the requirements to			Α		350		0	
B	qualified joint venture. See instru			В					
С				С					
	of Property:				_				
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land			Self-Rental	\		
2	Multi-Family Residence 4 Commercial		6 Roya	lities	8	Otner (desc	ribe)		
						Propert	ies:		
Incom				Α		В			С
3	Rents received	3		8	57.				
4	Royalties received	4							
Exper									
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		3,4	51.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10		- 1	4.7				
11	Management fees	11		3,4	4 / .				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13 14		<i>1</i> E	60				
14 15	Repairs	15		4,5 4,9					
16	Taxes	16		4,3	03.				
17		17		2,5	68				
18	Utilities	18		3,5					
19	Other (list)	19		3,3	12.				
20	Total expenses. Add lines 5 through 19	20		22,5	61.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If			,					
	result is a (loss), see instructions to find out if you must								
	file <b>Form 6198</b>	21	-	-21,7	04.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(	21 <b>,</b> 70			)	(	)
23a	Total of all amounts reported on line 3 for all rental prope				23a		857.		
b	Total of all amounts reported on line 4 for all royalty prop				23b				
C	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d		3,542.		
e	Total of all amounts reported on line 20 for all properties				23e	22	2,561.		
24	Income. Add positive amounts shown on line 21. <b>Do not</b>		-				. 24	/	01 704 \
25	Losses. Add royalty losses from line 21 and rental real estat							(	21,704.)
26	Total rental real estate and royalty income or (loss).								

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 . .

26

-21,704.