Form **8879**

(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

	30				
Submission Iden	ntification Number (SID)				
Taxpayer's name	Soc	ial securit	y numb	er	
NITHIN CHE	PURI 7	93-50-	- -3573	3	
Spouse's name				rity numbe	r
Dowt I Toy	Patrium Information Toy Voor Ending December 21		×0.011+	horizina	
	Return Information — Tax Year Ending December 31, 2023 (Enter year early on lines 1 through 5	r you a	re aut	nonzing	<u>·) </u>
	ars only on lines 1 through 5. 0-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	gross income		11	123	3,752.
•			2		9,776.
	ncome tax withheld from Form(s) W-2 and Form(s) 1099		3		3,776.
	ou want refunded to you		4		1,000.
	/ou owe		5		.,
Part II Tax	κραyer Declaration and Signature Authorization (Be sure you get and keep	a cop	y of y	our retu	ırn)
my knowledge and return (original or a to send my return for any delay in proagent to initiate an payment of my fed authorization is to payment, I must obusiness days prictaxes to receive opersonal identificat	if perjury, I declare that I have examined a copy of the income tax return (original or amended) I am do belief, it is true, correct, and complete. I further declare that the amounts in Part I above are amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection occessing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Trans ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated deral taxes owed on this return and/or a payment of estimated tax, and the financial institution to be remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests or to the payment (settlement) date. I also authorize the financial institutions involved in the process of the payment (settlement) date. I also authorize the financial institutions involved in the process of the payment (settlement) below is my signature for the income tax return (original or amended) I am now Withdrawal Consent.	e the amo or electro of the tr easury and in the ta debit the authorizade must be essing of ent. I furt	ounts from the counts of the counts of the country the	om the in urn origina sion, (b) ti lesignated aration so this acco o revoke red no late ectronic pa	ncome tax ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the
	: check one box only				ı
	rize GLOBAL TAXES LLC to enter or generate my P		3 5	7 3	as my
_	re on the income tax return (original or amended) I am now authorizing.	Ent		digits, but all zeros	asiny
☐ I will en	nter my PIN as my signature on the income tax return (original or amended) I am now a are entering your own PIN and your return is filed using the Practitioner PIN method. T				
Your signature	▶ Date ▶				
Snouse's DIN: o	check one box only				
author	•	INI			as my
	ERO firm name		ter five o	digits, but	as my
signatu	re on the income tax return (original or amended) I am now authorizing.			all zeros	
	nter my PIN as my signature on the income tax return (original or amended) I am now a are entering your own PIN and your return is filed using the Practitioner PIN method. T				
Spouse's signatu	ure ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part III Cer	rtification and Authentication — Practitioner PIN Method Only				
ERO's EFIN/PIN	N. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2 2	4 9 Don't ente	6 0 er all ze	-	7 1
authorized to file f	bove numeric entry is my PIN, which is my signature for the electronic individual income tax return for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Pub. 1345, Handbook for Pub. 1345, Handbook for Authorized IRS e-file Pub. 1345, Handbook for	this retu	ırn in a	ccordance	
ERO's signature	Date ►				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To Do S	0			

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

£104 (artment of the Treasury-Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this	s space.
For the year Ja	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ding			, 20		See se	oarate i	instructi	ions.
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	urity nu	mber
NITHIN			CHEP	URI							793	50	3573	3
If joint return, s	pouse's	s first name and middle initial	Last na											y number
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons					Apt. no.		Drosido	ntial Fle	ection C:	ampaign
1991 PA		• •		00.						- 1			ou, or yo	
		ice. If you have a foreign address, also co	mplete s	paces bel	low.	Sta	te	ZIP c	ode			•	jointly, v	
ALLEN						TX	ζ	750	13		•		nd. Chec not char	•
Foreign countr	y name		F	Foreign pr	rovince/state/				n postal c		your tax			ige
												Yo	u 🗌	Spouse
Filing Status	s 🗵	Single					☐ Head of h	ouseh	old (HOI	H)				
Check only		Married filing jointly (even if only o	ne had i	ncome)			_							
one box.		Married filing separately (MFS)					☐ Qualifying		0 1	,	,			
		you checked the MFS box, enter the			oouse. If yo	u che	ecked the HOH	or Q	SS box,	enter	the chi	ld's na	me if the	е
	qu	ıalifying person is a child but not you	ır deper	ndent:										
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward	d, award, or	payn	nent for prope	rty or	services); or (b) sell,			
Assets	exch	nange, or otherwise dispose of a dig	ital asse	et (or a fir	nancial inter	est ir	n a digital asse	et)? (Se	ee instru	ction	s.)	X Ye	es 🗌	No
Standard		neone can claim: You as a de	pendent	t 🗌	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-status	alien								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bl	ind Sp e	ouse	: Was bor	rn befo	ore Janu	ary 2,	, 1959		s blind	
Dependent	s (see	instructions):		(2) 5	Social security	,	(3) Relationsh	nip (4) Check t	he bo	x if quali	fies for (see instr	uctions):
If more	(1) F	irst name Last name			number		to you		Child t	ax cre	edit	Credit fo	r other de	ependents
than four														
dependents, see instruction	s —													
and check	, —									<u> </u>			Щ.	
here L														400
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		141,	493.
Attach Form(s)	b	Household employee wages not re									1b			
W-2 here. Also attach Forms	C C	Tip income not reported on line 1a Medicaid waiver payments not rep	•		•						10			
W-2G and	d	Taxable dependent care benefits f				nstru	ictions)				1d 1e			
1099-R if tax was withheld.	e f	Employer-provided adoption bene									1f	_		
If you did not		Wages from Form 8919, line 6.	1115 11011	11 01111 6	039, 11116 29	•					1g			
get a Form	g h	Other earned income (see instruct	ione)								1h			0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,					i.						
instructions.	Z	Add lines 1a through 1h					· · <u> </u>				1z		141,	493.
Attach Sch. B			2a			b Ta	axable interes	t .			2b	_		
if required.	3a	· –	3a				ordinary divide				3b	_		
	4a	IRA distributions	4a				axable amoun				4b			
Standard Deduction for—	5a	_	5a			b Ta	axable amoun	t			5b			
Single or	6a	Social security benefits	6a				axable amoun				6b			
Married filing separately,	С	If you elect to use the lump-sum e	lection r	method,	check here					. [
\$13,850	7	Capital gain or (loss). Attach Sche	dule D if	f required	d. If not requ	uired,	, check here			. 🗆	7		-3 ,	000.
 Married filing jointly or 	8	Additional income from Schedule									8		-14,	741.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is y	our total in	come	e				9		123,	752.
\$27,700	10	Adjustments to income from Sche	dule 1, l	line 26							10			
Head of household,	11	Subtract line 10 from line 9. This is	s your a c	djusted	gross inco	me					11		123,	752.
\$20,800 If you checked	12	Standard deduction or itemized	deduct	ions (fro	m Schedule	: A)					12		<u>13,</u>	850.
any box under Standard	13	Qualified business income deduct	ion from	Form 89	995 or Form	1 899	5-A				13			
Deduction,	14										14			850.
see instructions.	15	Subtract line 1/1 from line 11 If zer	or loc	c ontor	O Thic ic v	(A)	tavabla incom	•			15	1	1 / 0	un2

Form 1040 (2023	3)								Page Z		
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	19,776.		
Credits	17	Amount from Schedule 2, line	e3					17			
	18	Add lines 16 and 17						18	19,776.		
	19	Child tax credit or credit for o	other dependen	ts from Sched	ule 8812			19			
	20	Amount from Schedule 3, line	e8					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	19,776.		
	23	Other taxes, including self-er	mployment tax,	from Schedule	e 2, line 21			23	0.		
	24	Add lines 22 and 23. This is y	our total tax					24	19,776.		
Payments	25	Federal income tax withheld	from:								
-	а	Form(s) W-2				25a 23	3,776.				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c .						25d	23 , 776.		
If you have a	26	2023 estimated tax payments	s and amount a	pplied from 20)22 return			26			
qualifying child,	27	Earned income credit (EIC) .			No .	27					
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812									
	29	American opportunity credit	from Form 8863	8, line 8		29					
	30	Reserved for future use				30					
	31	Amount from Schedule 3, line	e 15			31					
	32	Add lines 27, 28, 29, and 31.	These are your	total other pa	ayments and refu	ndable credits		32			
	33	Add lines 25d, 26, and 32. Th	nese are your to	tal payments				33	23,776.		
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	4,000.		
	35a	Amount of line 34 you want r	efunded to you	ı. If Form 8888	is attached, chec	k here	. 🗆	35a	4,000.		
Direct deposit?	b	Routing number 0 1 1				Checking	Savings				
See instructions.	d	Account number 3 9 4	0 0 6 0	0 9 1 0	6 4						
	36	Amount of line 34 you want a	pplied to your	2024 estimate	ed tax	36					
Amount	37	Subtract line 33 from line 24.									
You Owe		For details on how to pay, go	_	-				37			
	38	Estimated tax penalty (see in	structions) .			38					
Third Party		you want to allow another	•								
Designee							•		⊠ No		
		signee's me		Phone no.			onal ident ber (PIN)	tification			
Sign	Un	der penalties of perjury, I declare th	at I have examined	d this return and	accompanying sche	dules and statemen	ts, and to	the best	of my knowledge and		
Here	be	lief, they are true, correct, and comp	olete. Declaration of	of preparer (othe	r than taxpayer) is ba	sed on all informati	on of whic	h prepar	er has any knowledge.		
Here	Yo	ur signature		Date	Your occupation				nt you an Identity		
						NOTHER		tection P e inst.)	IN, enter it here		
Joint return? See instructions.		ougo's signature. If a joint return b	ath must sign	Date	SOFTWARE E				nt vour enques en		
Keep a copy for your records.		Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupan	JII	Idei	If the IRS sent your spouse an identity Protection PIN, enter it here (see inst.)			
-		one no. (504) 458-4456	<u> </u>	Email address	CHEDIDINI	TNIG CMATT C					
		one no. (504) 458-4456 eparer's name	Preparer's signat	l	CHEPURINITH	Date	PTIN		Check if:		
Paid					מווסקה האודאו			2703	Self-employed		
Preparer											
Use Only									Phone no. (678) 965-9522		
	/F	m saucess 240 ROUNE I		TADAATCI/ IA	0 00010		Fill	n's EIN	84-3171965		

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

NITHIN CHEPURI

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

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

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

	Sequence No. 01
Your soc	ial security number
793-50	-3573

Par	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. Att	ach Schedule E .	5	-14,741.
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		
- 1	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t	_	
u	Wages earned while incarcerated	8u	_	
Z	Other income. List type and amount:			
_	Table the face of Addition On the state O	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente		, ,	1 4 7 41
	1040, 1040-SR, or 1040-NR, line 8		10	-14,741.

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	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 adjustments to income			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)

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.

OMB No. 1545-0074

	Department of the Treasury Internal Revenue Service 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.									
	e(s) shown on return						security number			
	THIN CHEPURI	nvestment(s) in a qualified opportunity	fund during the to	v voor? Voo		93-50	-35/3			
	•	49 and see its instructions for additiona	•	•						
Pa	rt I Short-Ter	m Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less	(see in	structions)			
lines This	below.	to figure the amounts to enter on the to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	Adjus to gain o Form(s) 8	(g) stments r loss from 949, Part I column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)			
	Totals for all short 1099-B for which I which you have However, if you ch	-term transactions reported on Form pasis was reported to the IRS and for no adjustments (see instructions). Hoose to report all these transactions we this line blank and go to line 1b.				(3)	(3)			
1b		actions reported on Form(s) 8949 with	3,491.	6,918.			-3,427.			
2	Totals for all transa	actions reported on Form(s) 8949 with	3,491.	0,910.			-3,427.			
3	Totals for all transa	actions reported on Form(s) 8949 with								
4		om Form 6252 and short-term gain or (lo	oss) from Forms 4	684, 6781, and 88	324 .	. 4				
5		gain or (loss) from partnerships, S	•			om . 5				
6	Worksheet in the					. 6	()			
7		apital gain or (loss). Combine lines 1a or losses, go to Part II below. Otherwise					-3,427.			
Pai	rt Ⅱ Long-Teri	n Capital Gains and Losses—Ger	nerally Assets H	leld More Than	One Y	ear (see	instructions)			
lines This	below.	to figure the amounts to enter on the to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	Adjus to gain o Form(s) 8	(g) stments r loss from 949, Part II column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)			
8a	1099-B for which I which you have However, if you ch	term transactions reported on Form pasis was reported to the IRS and for no adjustments (see instructions), noose to report all these transactions we this line blank and go to line 8b.								
8b		actions reported on Form(s) 8949 with	98.	276.			-178.			
9		actions reported on Form(s) 8949 with								
	Box F checked.	actions reported on Form(s) 8949 with								
	from Forms 4684,	797, Part I; long-term gain from Forms 6781, and 8824				. 11				
		or (loss) from partnerships, S corporations. See the instructions								

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

-178.

14

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -3,605.• 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 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.) • (\$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.

2023
Attachment
Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return
NITHIN CHEPURI

Department of the Treasury

Internal Revenue Service

Social security number or taxpayer identification number

793-50-3573

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(C) Short-term transactions	-		-	sis wasn't report	ed to the IF	RS	
1	(a) Description of property	(b) Date acquired	(c)		(e) Cost or other basis See the Note below	Adjustment, if 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).
Robin	nhood Securities LLC	01/01/23	12/31/23	3,491.	6,918.			-3,427.
ne(Scl	tals. Add the amounts in columns gative amounts). Enter each total nedule D, line 1b (if Box A above bye is checked), or line 3 (if Box 6)	lude on your ne 2 (if Box B	3,491.	6,918.			-3,427.	

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 $\tt NITHIN\ CHEPURI$

Social security number or taxpayer identification number 793-50-3573

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	9-B showing bas	is 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										
•					A 11 1 1 16 1 1 1					

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	sceeds See the Note below		if any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.) disposed of (Mo., day, yr.)		(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/22	12/31/23	98.	276.			-178.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	98.	276.			-178.		

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

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

NITE	HIN CHEPURI						793-5	0-3573	}	
Par	Income or Loss From Rental Real Estate ar Note: If you are in the business of renting personal properental income or loss from Form 4835 on page 2, line 40.	rty, use		C . See	instru	ections. If you	are an indiv	vidual, rep	oort farm	
Α	Did you make any payments in 2023 that would require you		Form(s) 1	1099? S	See in	structions .		. 🗌 Ye	es 🛛 N	No
В	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 N	No
1a	Physical address of each property (street, city, state, ZI									
			•) F O O 1						
_ <u>A</u>	2-10-300 JYOTHI NAGAR KARIMNAGAR TELAI	NGANA	JC ML A	15001						
B										
C	Town of December 2005				_					
1b	Type of Property (from list below) 2 For each rental real estate properties above, report the number of fair				Fa	air Rental Days	Person Da		QJ,	V
A	personal use days. Check the Q			Α		290	Du	0		1
B	if you meet the requirements to	file as a	a	В		230		0		1
	qualified joint venture. See instru	uctions	i.	C						1
	of Property:									1
1	Single Family Residence 3 Vacation/Short-Term Rem Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (desc	cribe)			
						Propert	ies:			
Incon	ne:			Α		В			С	
3	Rents received	3		6	90.					
4	Royalties received	4								
Expe										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		8	90.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,7	49.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14			45.					
15	Supplies	15		4,1	00.					
16	Taxes	16		1 7	4 -					
17	Utilities	17			45.					
18	Depreciation expense or depletion	18		3,1	02.					
19	Other (list) Total expenses. Add lines 5 through 19	19		1 = 1	21					
20		20		15,4	31.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198			-14,7	41.					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(14,74	1.)	()	(
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		690.			
b	Total of all amounts reported on line 4 for all royalty prop	perties			23b					
С	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties				23d		3,102.			
е	Total of all amounts reported on line 20 for all properties				23e	1.	5,431.			
24	Income. Add positive amounts shown on line 21. Do no		•				. 24			
25	Losses. Add royalty losses from line 21 and rental real estat	te losse	es from lin	e 22. Ei	nter to	otal losses he	re 25	(14,74	1.
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this a						on		-14,7	41.