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

Internal Revenue Service Control of the fatest information.		
Submission Identification Number (SID)		
Taxpayer's name	Social security	number
SANGAMESWARA SAI MOVVA	797-13-	7151
Spouse's name	Spouse's socia	al security number
		11 11 1
	nter year you are	e autnorizing.)
Enter whole dollars only on lines 1 through 5.		
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	1	4 00 107
1 Adjusted gross income	-	1 98,137.
 Total tax		2 13,833. 3 16.275.
4 Amount you want refunded to you	_	= 0,2701
5 Amount you want retained to you		4 2,442. 5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an		-
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amen		
for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of 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 terming payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended	indicated in the tax itution to debit the e inate the authorizat requests must be the processing of the payment. I furth	c preparation software for entry to this account. This ion. To revoke (cancel) a received no later than 2 the electronic payment of er acknowledge that the
Electronic Funds Withdrawal Consent.		
Taxpayer's PIN: check one box only	. 3	7 1 5 1
X I authorize GLOBAL TAXES LLC to enter or generation to enter or generation to enter or generation.	ate my PIN Ente	er five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don'	t enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN m below.		
Your signature ► Date I	-	
Spauge's DINL shock and have anly		
Spouse's PIN: check one box only	ata mu DIN	
I authorize to enter or general to enter	-	as my
signature on the income tax return (original or amended) I am now authorizing.		r five digits, but t enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN and your return is filed using the Practitioner PIN m below.		
Construction &		
Spouse's signature Date Date		
Practitioner PIN Method Returns Only—continue bell Part III Certification and Authentication — Practitioner PIN Method Only	IUW	
Part III Certification and Authentication — Practitioner PIN Method Only		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 2 4 9 6 Don't enter	1 - 1 - 1 - 1 - 1
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am some requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers	ubmitting this return	n in accordance with the
ERO's signature ▶ Date I		
ERO 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

						01112 1101 10 10		, .	30 mot m	no or orapio iii ano c	opaco.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20	s	See sep	arate instruction	ons.
Your first name	and m	iddle initial	Last na	ame				Y	our soc	cial security nun	nber
SANGAMES	SWAR	A SAI	MOV	VA					797	13 7151	
-		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.	Р	resider	ntial Election Ca	mpaign
7920 CO	LLIN	DAVID SOUTH DR					211			ere if you, or yo	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Stat	te	ZIP code			if filing jointly, was this fund. Checl	
MCKINNE	Y				TX		75070			ow will not chang	
Foreign countr	y name			Foreign province/state/o	count	у	Foreign posta	l code y	our tax	or refund.	
										∐ You ☐ :	Spouse
Filing Status	s X	Single				Head of he	ousehold (H	OH)			
Check only		Married filing jointly (even if only or	ne had	income)		_					
one box.		Married filing separately (MFS)					surviving sp				
		ou checked the MFS box, enter the			u che	cked the HOF	or QSS box	k, enter t	the chil	d's name if the)
	qu	alifying person is a child but not you	ır depe	ndent:							
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	payn	nent for prope	rty or service	es); or (b) sell,		
Assets		ange, or otherwise dispose of a digi					-			☐ Yes 🛛	No
Standard	Som	eone can claim:	pender	nt Your spouse	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	u were a dual-status	alien						
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind Spo	ouse:	. Was bor	n before Jar	nuary 2	1959	☐ Is blind	
Dependent					T		(A) Chao			fies for (see instru	uctions):
-		irst name Last name		(2) Social security number	[']	(3) Relationsh to you	iib I, ,	d tax crec		Credit for other dep	,
If more than four	(.,							П			
dependents,								$\overline{\Box}$			
see instruction and check	s —							–			
here]										
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	ee instructions)					1a	112,4	476.
	b	Household employee wages not re	eportec	on Form(s) W-2					1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	ı (see ir	nstructions)					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	rom 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 instruction	ions)				,		1h		0.
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)		<u>1i</u>					
	<u>z</u>	Add lines 1a through 1h	. ;						1z	112,4	
Attach Sch. B	2a	' <u>-</u>	2a	100		axable interest			2b		306.
if required.	<u>3a</u>	<u> </u>	3a	122.		rdinary divide			3b		224.
Standard	4a		4a			axable amoun			4b		
Deduction for—	5a		5a			axable amoun			5b		
Single or Married filing	6a	,	6a			axable amoun	t		6b		
separately, \$13,850	_ c	If you elect to use the lump-sum e			•	,		. 🗀	_	1 ,	100
Married filing	7	Capital gain or (loss). Attach Sche						. Ц	7	_	426.
jointly or Qualifying	8	Add lines 17, 2h, 2h, 4h, 5h, 6h, 7							8	-16,2	295. 137.
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							10	70,1	101.
Head of	10 11	Adjustments to income from Scher Subtract line 10 from line 9. This is							10	00 1	137.
household, \$20,800	12	Standard deduction or itemized	-						12		850.
If you checked any box under	13	Qualified business income deducti				 5-Δ			13	+ 13,0	0.
Standard	14	Add lines 12 and 13	1011 1101	31111 0000 01 1 01111	. 000	од			14	13,8	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss. enter -0 This is v	 ⁄our t	axable incom	 ne		15		287.
				, y							•

	,						Page
Гах and	16	Tax (see instructions). Check if any from Form	(s): 1 881	4 2 🗌 4972 3 🗌	·	. 16	13,836.
Credits	17	Amount from Schedule 2, line 3				. 17	
	18	Add lines 16 and 17				. 18	13,836.
	19	Child tax credit or credit for other dependent	s from Sched	ule 8812		. 19	
	20	Amount from Schedule 3, line 8				. 20	3.
	21	Add lines 19 and 20				. 21	3.
	22	Subtract line 21 from line 18. If zero or less, 6	enter -0			. 22	13,833.
	23	Other taxes, including self-employment tax, f	from Schedule	2, line 21		. 23	0.
	24	Add lines 22 and 23. This is your total tax				. 24	13,833.
Payments	25	Federal income tax withheld from:					
-	а	Form(s) W-2		25 a	16,27	75.	
	b	Form(s) 1099		25 b			
	С	Other forms (see instructions)		250	:		
	d	Add lines 25a through 25c		.		. 25d	16,275.
If you have a qualifying child, attach Sch. EIC.	26	2023 estimated tax payments and amount ap	oplied from 20	22 return		. 26	
	27	Earned income credit (EIC)		No . 27			
	28	Additional child tax credit from Schedule 8812		28			
	29	American opportunity credit from Form 8863	, line 8	29			
	30	Reserved for future use		30			
	31	Amount from Schedule 3, line 15					
	32	Add lines 27, 28, 29, and 31. These are your	total other pa	yments and refundab	le credits .	. 32	
	33	Add lines 25d, 26, and 32. These are your to	tal payments			. 33	16,275.
Refund	34	If line 33 is more than line 24, subtract line 24	4 from line 33.	This is the amount you	overpaid .	. 34	2,442.
	35a	Amount of line 34 you want refunded to you	ı. If Form 8888	is attached, check her	е	☐ 35a	2,442.
irect deposit?	b	Routing number 1 0 1 1 0 0 0	4 5	c Type: X Chec	king 🗌 Savir	ngs	
ee instructions.	d	Account number 5 1 8 0 0 9 9	7 4 7 8	3 4			
	36	Amount of line 34 you want applied to your 2	2024 estimate	ed tax 36			
Amount	37	Subtract line 33 from line 24. This is the amo					
ou Owe	00	For details on how to pay, go to www.irs.gov		1		. 37	
	38	Estimated tax penalty (see instructions) .					
hird Party Designee		you want to allow another person to disc tructions		n with the IRS? See	Yes. Compl	ete below.	⋈ No
	Des	ignee's	Phone no.		Personal i number (P	dentification	
Niana		ler penalties of perjury, I declare that I have examined		accompanying schodulos	1		of my knowledge and
Sign Here		ef, they are true, correct, and complete. Declaration o					
		· · · · · · · · · · · · · · · · · · ·					,

bolitietain:						TACTIVED IV			
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.			Date	Spouse's occupation			If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)	
	Phone no. (818)405-381	6	Email address	MOVVASANGA	M@GMAIL.CO)M		
Daid	Preparer's name Prep		Preparer's signat	Preparer's signature			PTIN		Check if:
Paid	SYAM PRIYA RA	M SAGAR GUPTA	SYAM PRIY.	A RAM SAC	GAR GUPTA	04/15/2024	P020	082703	Self-employed
Preparer Use Only	Firm's name	GLOBAL TA	XES LLC				Р	hone no. (678) 965-9522
USE Office	Firm's address	245 ROONE	Y CT E BRU	NSWICK N	J 08816		F	irm's EIN	84-3171965

Joint return?

SOFTWARE ENGINEER

(see inst.)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

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

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

Your social security number
797-13-7151

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		5	-16,295.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (<u>)</u>	
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:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter			1.00-
	1040, 1040-SR, or 1040-NR, line 8		10	-16,295.

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis govern	ment		
	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)			
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m	-		
d	Reforestation amortization and expenses	-		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
Z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z	_	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here are			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

Department of the Treasury Internal Revenue Service

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.

Attachment Sequence No. **03** Your social security number

OMB No. 1545-0074

SAN	GAMESWARA SAI MOVVA		797-1	13-71	151	
Par	t I Nonrefundable Credits					
1	Foreign tax credit. Attach Form 1116 if required			1		3.
2	Credit for child and dependent care expenses from Form 2441, Form 2441	Attach	2	<u> </u>		
3	Education credits from Form 8863, line 19			3	ı	
4	Retirement savings contributions credit. Attach Form 8880		4			
5a	Residential clean energy credit from Form 5695, line 15			5a		
b	Energy efficient home improvement credit from Form 5695, line 32			5b		
6	Other nonrefundable credits:					
а	General business credit. Attach Form 3800	6a				
b	Credit for prior year minimum tax. Attach Form 8801	6b				
С	Adoption credit. Attach Form 8839	6c				
d	Credit for the elderly or disabled. Attach Schedule R	6d				
е	Reserved for future use	6e				
f	Clean vehicle credit. Attach Form 8936	6f				
g	Mortgage interest credit. Attach Form 8396	6g				
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h				
i	Qualified electric vehicle credit. Attach Form 8834	6i				
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j				
k	Credit to holders of tax credit bonds. Attach Form 8912	6k				
-1	Amount on Form 8978, line 14. See instructions	6I				
m	Credit for previously owned clean vehicles. Attach Form 8936 .	6m				
Z	Other nonrefundable credits. List type and amount:					
		6z				
7	Total other nonrefundable credits. Add lines 6a through 6z			7		
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10 1040-NR, line 20		SR, or	8		3.

Schedule 3 (Form 1040) 2023 Page **2**

Par	Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions)		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for repayment of amounts included in income from earlier years	13b		
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c		
d	Deferred amount of net 965 tax liability (see instructions)	13d		
Z	Other payments or refundable credits. List type and amount:	13z		
14	Total other payments or refundable credits. Add lines 13a through	n 13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 104 line 31		15	

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

OMB No. 1545-0074

2023

Attachment Sequence No. **12**

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.

Name(s) shown on return Your social security number 797-13-7151 SANGAMESWARA SAI MOVVA 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 Box A checked 12,524. 16. 11,137. 1,403. Totals for all transactions reported on Form(s) 8949 with Box B checked 200. 207. 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 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 1,410. 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 Box D checked 739. 728. -10. Totals for all transactions reported on Form(s) 8949 with Box E checked 150. 124. 26. 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 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15 16.

Page 2 Schedule D (Form 1040) 2023

Part III Summary

16	Combine lines 7 and 15 and enter the result	16	1,42	26.
	• 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?			
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	<u> </u> ()
	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.			
	RAA REV 03/07/24 PRO	Scl	hedule D (Form 1040)	2023

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074 Attachment

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.

Sequence No. 12A

Name(s) shown on return SANGAMESWARA SAI MOVVA Social security number or taxpayer identification number

797-13-7151

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.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I 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 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	,
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	See the separate instructions.		(h) Gain or (loss) Subtract column (e)
(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).
ACORNS SECURITIES LLC	01/01/23	12/31/23	4,460.	4,469.	W	16.	7.
ROBINHOOD SECURITIES LLC	01/01/23	12/31/23	8,064.	6,668.			1,396.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C)	al here and inc is checked), li	lude on your ne 2 (if Box B	12,524.	11,137.		16.	1,403.

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** Pa

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

SANGAME SWARA SAI MOVVA

Social security number or taxpayer identification number

797-13-7151

797–13–7151

B or substitute statement(s) from your broker. A substitute

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☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on	Form(s) 1099	-B showing bas	•)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f 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	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ACORNS SECURITIES LLC	01/01/22	12/31/23	339.	316.	W	1.	24.
ROBINHOOD SECURITIES LLC	01/01/22	12/31/23	389.	423.	W	0.	-34.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above	al here and inc	lude on your					

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.

728.

above is checked), or line 10 (if Box F above is checked) .

BAA REV 03/07/24 PRO Form **8949** (2023)

739.

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074 Attachment

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.

Sequence No. 12A

Name(s) shown on return

SANGAMESWARA SAI MOVVA

Social security number or taxpayer identification number

797-13-7151

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

(A) Short-term transactions(B) Short-term transactions(C) Short-term transactions	s reported on	Form(s) 1099	9-B showing bas	•		•	7)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	f 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	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 CRYPTO LLC	01/01/23	12/31/23	207.	200.			7.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A abov above is checked), or line 3 (if Box	al here and ince e is checked), li i	clude on your ne 2 (if Box B	207.	200.			7.

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

Social security number or taxpayer identification number Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SANGAMESWARA SAI MOVVA

797-13-7151

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.

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

Γ	7	(F)	Long-term	transactions	not re	eported t	o you	on Form	า 1099-B
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☐ (F) Long-term transactions not reported to you on Form 1099-B								
1	(a) escription of property		(c) Date sold or	(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.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e)
(Exa	(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)			(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOO	D CRYPTO LLC	01/01/22	12/31/23	150.	124.			26.
negative a Schedule [d the amounts in column mounts). Enter each tota d, line 8b (if Box D above necked), or line 10 (if Box	al here and inc e is checked), lir	lude on your ne 9 (if Box E	150.	124.			26.

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.

> Form **8949** (2023) REV 03/07/24 PRO BAA

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.

OMB No. 1545-0074

2023

Attachment Sequence No. 13

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

SANGAMESWARA SAI MOVVA 797-13-7151 **Income or Loss From Rental Real Estate and Royalties** Part I Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions В 1a Physical address of each property (street, city, state, ZIP code) UDYOGA NAGAR, PALAKALURU RD GUNTUR ANDHRA PRADESH IN 522006 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Days** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. C C Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** В C Income: 1,005. 3 Rents received . 4 Royalties received . 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 2,420. 7 7 Cleaning and maintenance . . . 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 11 1,950. 12 12 Mortgage interest paid to banks, etc. (see instructions) 13 13 14 3,956. 14 Repairs 15 15 3,560. Supplies 16 16 Taxes 1,400. 2,130. 17 Utilities 17 18 1,884. 18 Depreciation expense or depletion 19 19 Other (list) 20 20 17,300. Total expenses. Add lines 5 through 19 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 -16,295.file Form 6198 21 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 16,295. 22 1,005. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 1,884. Total of all amounts reported on line 18 for all properties 23d 17,300. e Total of all amounts reported on line 20 for all properties . 23e 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 16,295. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

-16,295.

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

Form **8995**

Department of the Treasury Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2023
Attachment
Sequence No. 55

Name(s) shown on return		
SANGAMESWARA	SAI	MOVVA

Your taxpayer identification number 797-13-7151

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)	
i				
ii				
iii				
iv				
v				
3	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2 3 ()		
3 4 5	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-Qualified business income component. Multiply line 4 by 20% (0.20)	4	5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6 1.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 ()		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	8 1.		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	0.
10	Qualified business income deduction before the income limitation. Add lines 5 and	1	10	0.
11	Taxable income before qualified business income deduction (see instructions)	11 84,287.	.	
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	12 138.		
13	, , , , , , , , , , , , , , , , , , ,	13 84,149.		
14	Income limitation. Multiply line 13 by 20% (0.20)		14	16,830.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also the applicable line of your return (see instructions)		15	0.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than	zero, enter -0	16	(0.)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 azero, enter -0-		17	(0.)