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

Submi	ssion Identification Number (SID)				
Taxpaye	r's name	Social security	y number		
VINO	DD KUMAR KAKUMANU	445-53-	-1527		
Spouse'	s name	Spouse's soci	al security	number	
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you ar	e autho	rizing.)	
Enter \	whole dollars only on lines 1 through 5.				
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	89,	818.
2	Total tax		2	11,	130.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	11,	255.
4	Amount you want refunded to you		4		125.
5	Amount you owe		5		
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a copy	of you	r retur	<u>n)</u>
return (to send for any Agent t paymer authoriz paymer busines taxes to persona	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, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indication is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate and the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised days prior to 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 particle of the payment (PIN) below is my signature for the income tax return (original or amended) I are financial Withdrawal Consent.	tter, or electro ction of the tra S. Treasury ar cated in the ta n to debit the the authoriza ests must be processing of ayment. I furtl	nic return ansmission of its desing a preparation. To received the electroner acknowless.	originato on, (b) the ignated F ition softwhis accou- revoke (cano later ronic pay owledge the	or (ERO) e reason inancial ware for unt. This ancel) a than 2 ment of that the
Тахра	yer's PIN: check one box only				
X		Ent	1 5 er five digi 't enter all		as my
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN method below.				
Your s	ignature ▶ Date ▶	04/09/2024			
Spous	e's PIN: check one box only				
	I authorize to enter or generate responsible to enter or ge	Ent don ow authorizir		r <mark>zeros</mark> k this bo	
Spous	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part	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 ente	5 0 8 er all zeros		1
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this retu	rn in acco	ordanće v	
FRO'°	signature ▶ Date ▶				
	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

IRS Use Only-Do not write or staple in this space.

For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling			, 20		See se	parate ins	tructions.
Your first name	and m	iddle initial	Last na	ame						Your so	ocial securi	ty number
VINOD KU	IMAR		KAKI	JMANU						445	53 1	527
		s first name and middle initial	Last na									curity number
										123	45 8	852
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.				Apt. no.				on Campaign
1244 EAS	· :тв	UCKHORN						·	- 1		here if you,	
		ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	ite	ZIP	code		•	٠,	ntly, want \$3
EAGLE MO	UNT.	AIN			נט	r	840	005		•	o this fund. Iow will not	Checking a
Foreign country				Foreign province/state/o				ign postal c			x or refund	
										•	You	Spouse
Filing Status	, [Single	-			Head of he	ousel	nold (HOI	H)			
Check only		Married filing jointly (even if only or	ne had	income)								
one box.	×	Married filing separately (MFS)				☐ Qualifying	survi	ving spo	use (0	QSS)		
	lf y	you checked the MFS box, enter the	name	of your spouse. If you	ı che	ecked the HOH	l or C	≀SS box,	enter	r the ch	ild's name	if the
	qu	alifying person is a child but not you	ır depe	ndent: BRAHMESWAR	I D	RONADULA						
Digital	Δt aı	ny time during 2023, did you: (a) rece	aiva (as	a reward award or	navr	ment for prope	rtv or	- sarvicas	:). or ((h) sell		
Assets		nange, or otherwise dispose of a digi									Yes	⊠ No
Standard		neone can claim: You as a de					, ,					
Deduction		Spouse itemizes on a separate return	•			•						
A are /Dianeles a se									0	1050		l'a al
		: Were born before January 2, 1	959 [Are blind Spo	ouse			fore Janu			Is b	
Dependents				(2) Social security number	'	(3) Relationsh to you	ip (Child t		-	1	e instructions): ther dependents
If more	(1)	irst name Last name		Hamber		to you					Orodit for ot	
than four dependents,							+					
see instructions	s —								<u> </u>			
and check here									<u> </u>			
-	1a	Total amount from Form(s) W-2, bo	nx 1 (se	e instructions)		l			<u> </u>	1a		<u> </u>
Income	b	Household employee wages not re	•	,						1b		00,0000
Attach Form(s) W-2 here. Also	c	Tip income not reported on line 1a		* *						10		
attach Forms	d	·	Tip income not reported on line 1a (see instructions)									
W-2G and	e	Taxable dependent care benefits f		, , , ,						1d		
1099-R if tax was withheld.	f	Employer-provided adoption bene		•						1f		
If you did not	g	Wages from Form 8919, line 6.		•						19		
get a Form	h	Other earned income (see instructi								1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,			1i						
	z	Add lines 1a through 1h								1z		89,060.
Attach Sch. B	2a	1	2a		b T	axable interest	t.			2b	,	
if required.	3a		3a	0 =		ordinary divider				3b		143.
	4a		4a			axable amount				4b	,	
Standard Deduction for—	5a	Pensions and annuities	5a		b T	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	_						. [
\$13,850	7	Capital gain or (loss). Attach Scheo	dule D i	if required. If not requ	iired	, check here			. [7	٦	620.
Married filing jointly or	8	Additional income from Schedule				-				8		- 5.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	•							9		89,818.
\$27,700	10	Adjustments to income from Sche		•						10		
Head of household,	11	Subtract line 10 from line 9. This is			ne					11		89,818.
\$20,800	12	Standard deduction or itemized	-							12		17,816.
If you checked any box under	13	Qualified business income deducti		•	,	5-A				13		•
Standard Deduction,	14	Add lines 12 and 13								14		17,816.
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss enter -0- This is v	our t	taxable incom	ıe.			15		72.002.

Form 1040 (2023	3)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 4972	2 3			16	11,130.
Credits	17	Amount from Schedule 2, lin	ie3					[17	0.
	18	Add lines 16 and 17							18	11,130.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812				19	
	20	Amount from Schedule 3, lin	ie 8						20	
	21	Add lines 19 and 20						[21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	11,130.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .			[23	0.
	24	Add lines 22 and 23. This is	your total tax					[24	11,130.
Payments	25	Federal income tax withheld								
•	а	Form(s) W-2				25a	11	,255.		
	b	Form(s) 1099				25b)			
	С	Other forms (see instructions	s)			250	;			
	d	Add lines 25a through 25c							25d	11,255.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	22 return			[26	
qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from								
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	ie 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and r	refundat	ole credits		32	
	33	Add lines 25d, 26, and 32. T	•		-			[33	11,255.
Refund	34	If line 33 is more than line 24							34	125.
11010111	35a	Amount of line 34 you want				•	=	. n t	35a	125.
Direct deposit?	b	Routing number 0 7 1			c Type:			Savings		
See instructions.	d	Account number 7 9 2								
	36	Amount of line 34 you want			ed tax	36	<u> </u>			
Amount	37	Subtract line 33 from line 24								
You Owe	0.	For details on how to pay, go		37						
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party		you want to allow another								
Designee		structions	•				Yes. Co	mplete be	low.	X No
3	De	signee's		Phone			Perso	nal identific	ation	
	naı			no.				er (PIN)		
Sign		der penalties of perjury, I declare the lief, they are true, correct, and com								
Here			piete. Declaration (ii ali lilloriilallo			, ,
	Yo	ur signature		Date	Your occupation	on				nt you an Identity IN, enter it here
Joint return?					SOFTWARE	ENGT	NEER	(see in		irv, criter it nore
See instructions.	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occu			If the II	RS se	nt your spouse an
Keep a copy for		,	3					Identity	y Prot	ection PIN, enter it here
your records.		(see i							st.)	
	Ph	one no. (325)669-092	0	Email address	VKAK265@	GMAII	.COM			
Paid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:
Preparer	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAG	SAR GUPTA	04/	/09/2024	P02082	703	Self-employed
Use Only	Fir	m's name GLOBAL TAX	XES LLC					Phone	no. ((678)965-9522
————	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816			Firm's	EIN	84-3171965
Go to www.irs.g	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV	03/07/24 PRO			Form 1040 (2023)

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

VINOD KUMAR KAKUMANU

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.

Your social security number 445-53-1527

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	- 5.
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:			
_	T. I.	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 1040, 1040-SR, or 1040-NR, line 8			E
	1.V.+V. 1.V.+V.=V.1.V.1.V.+V.=1.V.1.V.1.V.C.()		1 111	-5.

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

Par	t II Adjustments to Income					
11	Educator expenses			. 1	11	
12	Certain business expenses of reservists, performing artists, and fee-					
	officials. Attach Form 2106			· . 1	12	
13	Health savings account deduction. Attach Form 8889			. 1	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			. 1	14	
15	Deductible part of self-employment tax. Attach Schedule SE				15	
16	Self-employed SEP, SIMPLE, and qualified plans			. 1	16	
17	Self-employed health insurance deduction			. 1	17	
18	Penalty on early withdrawal of savings				18	
19a	Alimony paid				9a	
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			. 2	23	
24	Other adjustments:					
а		24a				
b	Deductible expenses related to income reported on line 8l from the					
	, , , , , , , , , , , , , , , , , , , ,	24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					
	• • • • • • • • • • • • • • • • • • • •	24c				
d		24d				
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e				
f		24f				
g		24g				
h	Attorney fees and court costs for actions involving certain unlawful					
	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					
	-	24i				
j	<u>-</u>	24j				
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
		24k				
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	r here and	ı on ا		
	Form 1040, 1040-SR, or 1040-NR, line 10			. 2	26	

SCHEDULE A (Form 1040)

Itemized Deductions

Attach to Form 1040 or 1040-SR.

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

OMB No. 1545-0074

2023
Attachment Sequence No. 07

Department of the Treasury Internal Revenue Service

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Name(s) shown on	Form	1 1040 or 1040-SR			Your	SO	cial security number
VINOD KUM	AR	KAKUMANU			445	5-5	53-1527
Medical		Caution: Do not include expenses reimbursed or paid by others.					
and	1	Medical and dental expenses (see instructions)	1				
Dental		Enter amount from Form 1040 or 1040-SR, line 11 2	-		_		
Expenses		Multiply line 2 by 7.5% (0.075)	3				
		Subtract line 3 from line 1. If line 3 is more than line 1, enter -0				4	
Taxes You		State and local taxes.					
Paid		State and local income taxes or general sales taxes. You may include					
		either income taxes or general sales taxes on line 5a, but not both. If					
		you elect to include general sales taxes instead of income taxes,					
		check this box	5a	4,220	٥. ا		
	k	State and local real estate taxes (see instructions)	5b	2,211			
	c	State and local personal property taxes	5с	•			
	c	Add lines 5a through 5c	5d	6,431	L.		
	e	Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing		•			
		separately)	5е	5,000).		
	6	Other taxes. List type and amount:					
		Foreign taxes from interest & dividends	6	1			
	7	Add lines 5e and 6				7	5,001.
Interest	8	Home mortgage interest and points. If you didn't use all of your home					
You Paid		mortgage loan(s) to buy, build, or improve your home, see					
Caution: Your mortgage interest		instructions and check this box					
deduction may be	a	Home mortgage interest and points reported to you on Form 1098.					
limited. See instructions.		See instructions if limited	8a	12,815	5.		
	k	Home mortgage interest not reported to you on Form 1098. See					
		instructions if limited. If paid to the person from whom you bought the					
		home, see instructions and show that person's name, identifying no.,					
		and address	8b		-		
	C	Points not reported to you on Form 1098. See instructions for special	0.0				
	_	rules	8c 8d				
		Add lines 8a through 8c	ou 8e	12 015			
		Investment interest. Attach Form 4952 if required. See instructions	9	12,815	,		
		Add lines 8e and 9			٠,	10	12,815.
Gifts to		Gifts by cash or check. If you made any gift of \$250 or more, see			-		12,013.
Charity	• • •	instructions	11				
Caution: If you	12	Other than by cash or check. If you made any gift of \$250 or more,					
made a gift and		see instructions. You must attach Form 8283 if over \$500	12				
got a benefit for it, see instructions.	13	Carryover from prior year	13		_		
		Add lines 11 through 13	-		1	14	
Casualty and		Casualty and theft loss(es) from a federally declared disaster (other			d		
Theft Losses		disaster losses). Attach Form 4684 and enter the amount from line 1		•			
		instructions				15	
Other	16	Other—from list in instructions. List type and amount:			_		
Itemized							
Deductions					1	16	
Total	17	Add the amounts in the far right column for lines 4 through 16. Also, e			n 📗		
Itemized		Form 1040 or 1040-SR, line 12			_	17	17,816.
Deductions	18	If you elect to itemize deductions even though they are less than your	stan	dard deduction	۱,		
		check this box					

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

Attachment

Department of the Treasury Sequence No. 12 Go to www.irs.gov/ScheduleD for instructions and the latest information. Internal Revenue Service Name(s) shown on return Your social security number 445-53-1527 VINOD KUMAR KAKUMANU 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 Form(s) 8949, Part I, combine the result (sales price) (or other basis) 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 7,105. 6,608. 2. 499. 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 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 7 499. 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 Form(s) 8949, Part II, (sales price) (or other basis) 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 971. 1,061. 31. 121. 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

121.

14

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 620. • 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? X 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? X 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 qualified 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.

Department of the Treasury

Internal Revenue Service

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 Attachment

Sequence No. 12A

Name(s) shown on return VINOD KUMAR KAKUMANU Social security number or taxpayer identification number

445-53-1527

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☐ (B) Short-term transactions☐ (C) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	•	,	•	e)	
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	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 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).	
DRIVEWEALTH, LLC	01/01/23	12/31/23	80.	87.	W	0.	-7.	
Apex Clearing	01/01/23	12/31/23	3,716.	3,409.	W	2.	309.	
Robinhood Securities LLC	01/01/23	12/31/23	3,309.	3,112.			197.	
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 A)	al here and inc is checked), lir	lude on your ne 2 (if Box B	7 105	6 608		2	499	

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

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

Social security number or taxpayer identification number

VINOD KUMAR KAKUMANU 445-53-1527

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

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 (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(b) (c) Date sold or disposed of		(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate	(f) (g) Code(s) from Amount of		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
				instructions.	instructions	Amount of adjustment	with column (g).
Apex Clearing	01/01/22	12/31/23	915.	870.	W	31.	76.
Robinhood Securities LLC	01/01/23	12/31/23	146.	101.			45.
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), lir	lude on your ne 9 (if Box E	1,061.	971.		31.	121.

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.

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

Caution: The IRS	S compares amounts reporte	d on your tax return with amounts show	n on Schedule(s) K-1

- (-)	D KUMAR KAKUMANU	a social security fluriber	II SHOW	ii oii otilei s	ide.			'	1115_5	3-1527	number	
	on: The IRS compares amounts	roported on your to	ov roti	ırn with a	mounte e	hown	on Schodu			3-1327		
Part		Partnerships ar ceive a distribution, d 28 and attach the red	nd S (ispose quired l	Corporation of stock, of basis comp	tions or receive a outation. If	a loan r	repayment fr port a loss fi	om an S	corpora t-risk ac			
27	Are you reporting any loss not passive activity (if that loss was see instructions before complete.)	as not reported on	Form	8582), or	unreimb	ursed		expen	ses? If	you ansv		
28	(a) Name		(b) E partr	inter P for nership; S	(c) Check foreign	if	(d) Employ	/er	(e) C	heck if mputation	(f) Check if any amount is	
Α	ALLIANCE RESOURCE PA	RTNERS, I.P	tor S c	corporation P	partnersh	пр	73-1564	280	is re	quired	not at risk	
В				_			, 0 1001					
С												
D												
	Passive Income						passive In					
	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive incom from Schedule K-			ssive loss a Schedule K	-1)	(j) Section	n 179 exp from Forr			(k) Nonpassive income from Schedule K-1	
Α_						5.						
B C												
D												
29a	Totals											
b	Totals					5.						
30	Add columns (h) and (k) of line	29a							30			
31	Add columns (g), (i), and (j) of li	ne 29b							31	(5.)	
32	Total partnership and S corp			. Combin	e lines 30	and (31		32		-5.	
Part	III Income or Loss From	Estates and Tru	ısts									
33		(a) !	Name							(b) Emp identification		
A B												
ь	Passive	Income and Loss					Nonnas	sive Inc	come a	nd Loss		
	(c) Passive deduction or loss allo		Passive	Passive income (e) Deduction or loss						(f) Other inc	ome from	
_	(attach Form 8582 if required	froi	n Sche	dule K-1		fro	m Schedule K	(-1		le K-1		
A B												
<u>ь</u> 34а	Totals								-			
	Totals											
35	Add columns (d) and (f) of line	34a							35			
36	Add columns (c) and (e) of line	34b							36	()	
37	Total estate and trust income								37			
Part	V Income or Loss From	Real Estate Mo	rtgag							ıl Holde	r	
38	(a) Name	(b) identific	Employ cation no	EI .	c) Excess in Schedules (see instr	Q , line	2c (n	axable ind et loss) fro dules Q , l	om		come from les Q, line 3b	
39	Combine columns (d) and (e) o	nly. Enter the result	t here	and inclu	de in the	total o	n line 41 h	elow -	39			
Part									1			
40	Net farm rental income or (loss) from Form 4835 .	Also,	complete	line 42 b	elow .			40			
41	Total income or (loss). Combi 1 (Form 1040), line 5	ne lines 26, 32, 37,	39, an 	nd 40. Ent 	er the res	ult hei	re and on S	chedule	41		-5.	
42	Reconciliation of farming a farming and fishing income rep (Form 1065), box 14, code B; S AN; and Schedule K-1 (Form 1065)	orted on Form 4839 schedule K-1 (Form	5, line 1120-	7; Sched S), box 1	ule K-1 7, code	42						
43	Reconciliation for real estate professional (see instructions reported anywhere on Form from all rental real estate activunder the passive activity loss	s), enter the net in 1040, Form 1040-S vities in which you	ncome SR, or materi	e or (los Form 10 ially partic	ss) you 040-NR cipated	43						

403011555

Utah State Tax Commission

Utah Individual Income Tax Return

All state income tax dollars support education, children and individuals with disabilities.

Amended Return - enter code:

(see instructions)

TC-40

2023

Your Social Security No. 445531527 Spouse's Soc. Sec. No. 123458852

If deceased, complete page 3, Part 1

Your first name
VINOD KUMAR
Spouse's first name

Spouse's first name

BRAHMESWARI

Address

Spouse's last name

DRONADULA

1244 EAST BUCKHORN

EAGLE MOUNTAIN

TAIN UT 84005

Your last name

KAKUMANU

State

ZIP+4

Full-yr Resident?
Y/N
Y

Telephone number

325-669-0920 Foreign country (if not U.S.)

• 22

4177

1 Filing Status - enter code	• 2 Qualifying Dependents		3 Election Campaign Fund					
1 = Single	a Dependents age 16 and	dunder	Does not increase	your tax or reduce your refund.				
 3 2 = Married filing jointly 	b Other dependents		Enter the code for the	ne Yourself Spouse				
3 = Married filing separately	c Dependents born in 202	23	party of your choice	. •				
4 = Head of household	d 0 Total (add lines a, b and	lc)	See instructions for	or				
5 = Qualifying surviving spouse			code letters or go	to incometax.utah.gov/elect.				
If using code 2 or 3, enter spouse's name and SSN above	See instructions.		If no contribution, er	nter N .				
4 Federal adjusted gross income from feder	al return		,	• 4 89818				
5 Additions to income from TC-40A, Part 1 (attach TC-40A, page 1)			• 5				
6 Total income - add line 4 and line 5		6 89818						
7 State tax refund included on federal form	7 State tax refund included on federal form 1040 , Schedule 1 , line 1 (if any)							
8 Subtractions from income from TC-40A, P	art 2 (attach TC-40A, page 1)			• 8				
9 Utah taxable income/loss - subtract the	sum of lines 7 and 8 from line 6			9 89818				
10 Utah tax - multiply line 9 by 4.65% (.0465) (not less than zero)			•10 4177				
11 Utah personal exemption (multiply line 2d b	oy \$1,941)	• 11	0	Flootronio filino				
12 Federal standard or itemized deductions		• 12	17816	Electronic filing is quick, easy and				
13 Add line 11 and line 12		13	17816	free, and will speed up your refund.				
14 State income tax included in federal itemiz	zed deductions	• 14	2789	To learn more, go to				
15 Subtract line 14 from line 13		15	15027	tap.utah.gov				
16 Initial credit before phase-out - multiply lin	e 15 by 6% (.06)	• 16	902					
17 Enter: \$16,742 (single or married filling se household); or \$33,484 (married filling se	parately); \$25,114 (head of ng jointly or qualifying surviving spo	• 17 use)	16742	-				
18 Income subject to phase-out - subtract line		18	73076					
19 Phase-out amount - multiply line 18 by 1.3	3% (.013)	• 19	950					
20 Taxpayer tax credit - subtract line 19 from	line 16 (not less than zero)			• 20 0				
21 If you are a qualified exempt taxpayer, ent	er "X" (complete worksheet in instr.)	• 21						

22 Utah income tax - subtract line 20 from line 10 (not less than zero)

403	Utah Individual Income Tax Return (continued) SSN 445531527 Last name KAKUMANU	INTUIT	TC-40 2023	Pg. 2
23	3 Enter tax from TC-40, page 1, line 22		23	4177
24	4 Apportionable nonrefundable credits from TC-40A, Part 3 (attach TC-40A, page 1)		• 24	
25	5 Full-year resident, subtract line 24 from line 23 (not less than zero) Non or Part-year resident, complete and enter the UTAH TAX from TC-40B, line 41		• 25	4177
26	6 Nonapportionable nonrefundable credits from TC-40A, Part 4 (attach TC-40A, page 1)		• 26	
27	7 Subtract line 26 from line 25 (not less than zero)		27	4177
28	8 Voluntary contributions from TC-40, page 3, Part 4 (attach TC-40, page 3)		• 28	
29	9 AMENDED RETURN ONLY - previous refund		• 29	
30	0 Recapture of low-income housing credit		• 30	
31	1 Utah use tax		• 31	
32	2 Total tax, use tax and additions to tax (add lines 27 through 31)		32	4177
33	3 Total withholding - If you have mineral production withholding or pass-through entity withholding	ng,	• 33	4220
34	complete page 3, Part 5. If not, enter on line 33 the total of TC-40W, Part 1. 4 Credit for Utah income taxes prepaid from TC-546 and 2022 refund applied to 2023		• 34	
35	5 AMENDED RETURN ONLY - previous payments		• 35	
36	6 Nonapportionable refundable credits from TC-40A, Part 5 (attach TC-40A, page 2)		• 36	
37	7 Apportionable refundable credits from TC-40A, Part 6, line c (attach TC-40A, page 2)		• 37	
38	8 Total withholding and refundable credits - add lines 33 through 37		38	4220
39	9 TAX DUE - subtract line 38 from line 32 (not less than zero)		• 39	
40	0 Penalty and interest (see instructions)		40	
41	1 TOTAL DUE - PAY THIS AMOUNT - add line 39 and line 40		• 41	
42	2 REFUND - subtract line 32 from line 38 (not less than zero)		• 42	43
43	3 Voluntary subtractions from refund (not greater than line 42)		• 43	
44	Enter the total from page 3, Part 6 4 REMAINING REFUND DIRECT DEPOSIT - your account information (see instructions for for Routing number 071000013 • Account number 792502812	eign accounts) Type:	· ·	savings foreign
Unde	nder penalties of perjury, I declare to the best of my knowledge and belief, this return and accompanying sched	dules are true, correc	t and complete.	
	IGN Your signature Date Spouse's signature (if	filing jointly)		Date
	hird Party Name of designee (if any) you authorize to discuss this return Designee's Designee	s telephone number	Designee PIN	
	Preparer's signature Date Preparer's	telephone number	Preparer's PTIN	I
Р	Paid SYAM PRIYA RAM SAGAR G 04/09/24 6789	659522	•	P02082703
Preparer's Firm's name GLOBAL TAXES LLC Preparer's EIN				
Sectionand address 245 ROONEY CT			•	843171965

40309

SSN 445-53-1527

Last name KAKUMANU

•

Pg. 1

Line Explanations IMPORTANT 1 Employer/payer ID number from W-2 box "b" or 1099 Do not send your W-2s or 1099s with your return. Instead enter Utah withholding ID number from W-2 box "15" or 1099 W-2 or 1099 information below, but only if there is Utah withholding (14 characters, ending in WTH, no hyphens) on the form. Employer/payer name and address from W-2 box "c" or 1099 Enter "X" if reporting Utah withholding from form 1099 Use additional forms TC-40W if you have more than four W-2s and/or 5 Employee's Social Security number from W-2 box "a" or 1099 1099s with Utah withholding tax. Utah wages or income from W-2 box "16" or 1099 Utah withholding tax from W-2 box "17" or 1099 Enter mineral production withholding from TC-675R in Part 2 of TC-40W; enter pass-through entity withholding in Part 3 of TC-40W. First W-2 or 1099 Second W-2 or 1099 1 812391387 2 (14 characters, no hyphens) (14 characters, no hyphens) 14718092003WTH 3 TEK SPIKES LLC 2727 LYNDON B JOHNSON FWY SUITE 3 FARMERS BRANCH TX75234 4 4 5 445531527 6 89060 7 7 4220 Third W-2 or 1099 Fourth W-2 or 1099 1 1 2 (14 characters, no hyphens) 2 (14 characters, no hyphens) 3 3 4 5 5 6 6 7 7

Total Utah withholding tax from all lines 7:

If you have nothing to enter on TC-40W, page 2, enter this total on TC-40, page 2, line 33. If you have entries on TC-40W, page 2, enter this total on TC-40, page 3, Part 5, line 1.

4220