# 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

Submission Identification Number (SID)				
Taxpayer's name	Social securit	y number		
PRANITH GADAPA	670-53-	-4852		
Spouse's name	Spouse's soc		y number	
Port I Tou Potum Information Tou Very Ending Personal of 0000 /Fr		و ما الدرو		
	nter year you a	re autno	orizing.)	
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	104,	736
2 Total tax		2		300.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		711.
4 Amount you want refunded to you		4		411.
5 Amount you owe		5		<u> </u>
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	nd keep a cop	y of you	ır returr	n)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amen my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I a return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trait to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for 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 termit 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) Electronic Funds Withdrawal Consent.  Taxpayer's PIN: check one box only  I authorize  GLOBAL TAXES LLC  to enter or general to the properties of the income tax return.	ded) I am now aut above are the amonsmitter, or electron of the trace U.S. Treasury and indicated in the talitution to debit the inate the authorizar requests must be the processing of the payment. I furt I am now authoritate my PIN	norizing, a bunts from onic return ansmission d its des ax prepara entry to t ation. To received the elect her ackni- zing and,	and to the income originato on, (b) the ignated Fi ation softwhis accourevoke (car on later ronic payrowledge to if applica	best of ome tax r (ERO) reason nancial vare for nt. This ancel) a than 2 ment of hat the
signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN and your return is filed using the Practitioner PIN me below.	m now authorizir	ng. Chec	k this bo	
Your signature ▶ Date ▶	<b>-</b>			
Spouse's PIN: check one box only				
• _	ata my DINI			
I authorize to enter or general to enter or general	_	er five dig		as my
signature on the income tax return (original or amended) I am now authorizing.		n't enter a		
I will enter my PIN as my signature on the income tax return (original or amended) I all if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.				
Spouse's signature ▶ Date ▶	•			
Practitioner PIN Method Returns Only—continue bel	low			
Part III Certification and Authentication — Practitioner PIN Method Only				
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 9 Don't ente	6 0 8 er all zeros		1
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incoma uthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am strequirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers	ubmitting this retu	rn in acc	ordanće v	
ERO's signature ▶ Date ▶	<b>&gt;</b>			
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested T				

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



<b>1040</b>		artment of the Treasury-Internal Revenue Servi		urn G	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning		<u>'</u>	, 2023, endi	ing			, 20		See se	parate	instructions.
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	curity number
PRANITH			GADA	.PA							670	53	4852
If joint return, s	pouse's	s first name and middle initial	Last na	me								•	security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				Α.	Apt. no.		Preside	ntial Ele	ection Campaigr
85 RIO 1	ROBL	ES E						1	103				ou, or your
City, town, or p	oost offi	ice. If you have a foreign address, also co	omplete s <sub>l</sub>	paces below	<b>'</b> .	Stat	te	ZIP co	ode				jointly, want \$3 nd. Checking a
SAN JOS	E					CA		951	34		U		not change
Foreign countr	y name		F	oreign provi	ince/state/o	count	y	Foreig	n postal c	ode	your tax	or refu	
Filing Status Check only one box.	s 🗵	Single  Married filing jointly (even if only or  Married filing separately (MFS)	ne had i	ncome)			☐ Head of ho		`	,	QSS)		
	qu	you checked the MFS box, enter the alifying person is a child but not you	ur depen	ident:								ild's na	me if the
Digital Assets		ny time during 2023, did you: (a) rec nange, or otherwise dispose of a dig										□ Ye	es 🗵 No
Standard Deduction	_	neone can claim:	•				a dependent						
Age/Blindnes	s You	:  Were born before January 2, 1	959	Are blind	Spo	use:	☐ Was bor	n befo	ore Janua	ary 2,	, 1959	l:	s blind
Dependent	s (see	instructions):		<b>(2)</b> Soc	ial security		(3) Relationsh	ip (4	) Check t	he bo	x if quali	fies for	(see instructions)
If more	(1) F	irst name Last name		nu	ımber		to you		Child t	ax cre	edit	Credit fo	or other dependents
than four													
dependents, see instruction	s												
and check here	1 —												
Income	 1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructio	ns)					<del>''</del>	1a		122,423.
	b	Household employee wages not re	eported	on Form(s)	W-2						1b	,	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							10	;			
attach Forms	d	Medicaid waiver payments not rep	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	from For	m 2441, lin	ne 26 .						1e	,	
was withheld.	f	Employer-provided adoption bene	efits from	Form 883	9, line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .									<b>1</b> g		
get a Form W-2, see	h	Other earned income (see instruct	ions) .								1h		0.
instructions.	i	Nontaxable combat pay election (s	see instr	ructions) .			1i						
	Z	Add lines 1a through 1h	. , .								1z		122,423.
Attach Sch. B	2a	Tax-exempt interest	2a			<b>b</b> Ta	axable interest	i .			<b>2</b> b		
if required.	3a_	Qualified dividends	3a			<b>b</b> O	rdinary divider	nds .			3b		
	4a	IRA distributions	4a			<b>b</b> Ta	axable amount	t			4b		
Standard Deduction for—	5а	Pensions and annuities	5a			<b>b</b> Ta	axable amount	t			5b		
Single or	6a	Social security benefits	6a			<b>b</b> Ta	axable amount	t			6b		
Married filing separately,	С	If you elect to use the lump-sum e	election r	nethod, ch	eck here (	(see i	instructions)						
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche	dule D if	required. I	f not requ	iired,	check here				7		-584.
jointly or	8	Additional income from Schedule	1, line 10	0							8		-17 <b>,</b> 103.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is your	r total inc	ome					9		104,736.
\$27,700	10	Adjustments to income from Sche	dule 1, l	ine 26 .							10	)	
Head of household,	11	Subtract line 10 from line 9. This is	s your <b>a</b> c	djusted gro	oss incon	ne					11		104,736.
\$20,800 If you checked	12	Standard deduction or itemized	deducti	i <b>ons</b> (from s	Schedule	A)					12	:	13,850.
any box under Standard	13	Qualified business income deduct	ion from	Form 8995	5 or Form	899	5-A				13		
Deduction,	14										14		13,850.
see instructions.	15	Subtract line 1/1 from line 11. If zer	ro or less	ontor O	This is w	our t	avabla inaam				15	: 1	90 886

Form 1040 (2023	3)								Page Z		
Tax and	16	Tax (see instructions). Check it	f any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	15,300.		
Credits	17	Amount from Schedule 2, line	e3					17			
	18	Add lines 16 and 17						18	15,300.		
	19	Child tax credit or credit for c	other dependen	ts from Sched	ule 8812			19			
	20	Amount from Schedule 3, line	98					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	15,300.		
	23	Other taxes, including self-en	nployment tax,	from Schedule	e 2, line 21			23	0.		
	24	Add lines 22 and 23. This is y	our <b>total tax</b>					24	15,300.		
Payments	25	Federal income tax withheld	from:								
•	а	Form(s) W-2				<b>25a</b> 24	1,711.				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions)	)			25c					
	d	Add lines 25a through 25c .						25d	24,711.		
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			28					
	29	American opportunity credit f	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	indable credits		32			
	33	Add lines 25d, 26, and 32. Th	nese are your <b>to</b>	tal payments				33	24,711.		
Refund	34	If line 33 is more than line 24,	, subtract line 2	4 from line 33.	This is the amour	nt you <b>overpaid</b>		34	9,411.		
	35a	Amount of line 34 you want re	35a	9,411.							
Direct deposit?	b	Routing number 1 1 1			<b>c</b> Type:	Checking	Savings				
See instructions.	d	Account number 1 9 7	2 9 2 8	7 0							
	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	to www.irs.gov	//Payments or	see instructions .			37			
	38	Estimated tax penalty (see in	structions) .			38					
<b>Third Party</b>		you want to allow another	•								
Designee		structions					•		⊠ No		
		signee's me		Phone no.			onal iden ber (PIN)	titication			
Sign	Un	der penalties of perjury, I declare that	at I have examined	d this return and	accompanying sche	dules and statemer	its, 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		
								tection P e inst.)	IN, enter it here		
Joint return? See instructions.		avec's signature If a joint vature. It	ath mount nime	Date	TECH PROFE				nt		
Keep a copy for your records.		Spouse's signature. If a joint return, <b>both</b> must sign.			Spouse's occupati	on	Ide	f the IRS sent your spouse an dentity Protection PIN, enter it here see inst.)			
•		ano no (COO) 200 E1 E2	)	Email address	 	DAGCMATT C					
		one no. (682)300-5153 eparer's name	Preparer's signat	Email address	PKAN I THGADA	APA@GMAIL.CO Date	)M PTIN		Check if:		
Paid		'			מידדאים מחרוויי			2702	Self-employed		
Preparer		SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/05/2024 P0208									
Use Only		m's name GLOBAL TAX		MOMTOW N	T 00016				(678) 965-9522		
	rir 	m's address 245 ROONEY	CI E BRU	MOMICK N	0 00010		Firr	n's EIN	84-3171965		

# 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

PRANITH GADAPA

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. <b>01</b>
Your soc	ial security number
670-53	-4852

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797	4		
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-17,103.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (	)	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (	)	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
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 (	4	
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:	0_		
0	Total ather income. Add lines to through the	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter 1040, 1040-SR, or 1040-NR, line 8	nere and on Form	10	-17,103.
	10+0, 10+0-011, 01 10+0-1111, 1111 <del>0</del> 0		10	-1/,103.

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 Ia	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24j		-	
k		24k			
_	1041)	24K			
Z		24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b>			23	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		23/24 PRO		le 1 (Form 1040) 2023
	BAA	1\L'V UZ/	LUIZA FINO		

### SCHEDULE D (Form 1040)

### **Capital Gains and Losses**

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Go to www.irs.gov/ScheduleD for instructions and the latest information. OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service Name(s) shown on return Your social security number 670-53-4852 PRANITH GADAPA

#### 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. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with 267. 200. 67. Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . 3 Totals for all transactions reported on Form(s) 8949 with Box C checked . . . . . . . . . . . . . . . . . . Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 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 67. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (or other basis) Form(s) 8949, Part II, (sales price) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with 492. 338. -154.Totals for all transactions reported on Form(s) 8949 with **Box E** checked . . . . . . . . . . . . . . . . 161. 658. -497.10 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

-651.

15

Schedule D (Form 1040) 2023 Page 2

### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -584. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet . . . . . . . . . . . . . . . . . . 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. ☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 584.) 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

# Form **8949**

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

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.

OMB No. 1545-0074

Attachment Sequence No. 12A

Name(s) shown on return PRANITH GADAPA

Social security number or taxpayer identification number

670-53-4852

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)

	Short-term transactions )	•	` '	•	sis <b>wasii t</b> report	ed to the in	10	
1	(a) Description of property	(b) Date acquired	(c) Date sold or	(sales price)	(e) Cost or other basis See the <b>Note</b> below	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss) Subtract column (e)	
	(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)		and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinh	ood Securities LLC	01/01/23	12/31/23	267.	200.			67.
negat Sched	s. Add the amounts in columns ive amounts). Enter each tota dule D, line 1b (if Box A above	al here and inc e is checked), <b>lir</b>	lude on your ne 2 (if Box B	267	200			67

**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 PRANITH GADAPA

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E

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

Social security number or taxpayer identification number 670-53-4852

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.

X (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

	( <b>E</b> ) Long-term transactions ( <b>F</b> ) Long-term transactions				is <b>wasn't</b> reporte	ed to the IF	RS	
1	(a)	(b) Date acquired	(c) Date sold or	(d) Proceeds	Cost or other basis See the <b>Note</b> below	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss) Subtract column (e)	
	Description of property (Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Rob	inhood Securities LLC	01/01/22	12/31/23	338.	492.			-154.
				1	I .			

**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.

338.

492

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 PRANITH GADAPA

Social security number or taxpayer identification number 670-53-4852

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-B showing basis was reported to the IRS (see Note above)
- 区 (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

	not reported						
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Crypto LLC	01/01/22	12/31/23	161.	658.			-497.
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	161.	658.			-497.		

**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.

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

Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name(s) shown on return PRANITH GADAPA

Your social security number 670-53-4852

11(111	1111 01121111						0,0	00 100		
Part	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			C. See	instru	ctions. If you a	are an i	ndividual, re	port farn	n
	Did you make any payments in 2023 that would require you f "Yes," did you or will you file required Form(s) 1099?									No No
1a	Physical address of each property (street, city, state, ZIF									
Α	TARNAKA SECUNDERABAD TELANGANA IN 500		-,							
B	TARNARA SECONDERABAD TELANGANA IN 300	7017								
C										
1b	Type of Property (from list below)  2 For each rental real estate properabove, report the number of fair	rty list rental	ted and		Fa	ir Rental Days	sonal Use Days	(.).IV		
Α	personal use days. Check the Qu	JV box	conly [	Α		365		0		1
В	if you meet the requirements to f			В					<del>                                     </del>	<del>-</del>
С	qualified joint venture. See instru	ctions	S.	С					T 7	<del></del>
Туре	of Property:		1							
1	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (desci	ribe) <sub></sub>			
						Properti	es:			
Incon				Α		В			С	
3	Rents received	3		6	00.					
4	Royalties received	4								
Exper										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,3	25.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,0	23.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14		3,9						
15	Supplies	15		3,6	65.					
16	Taxes	16								
17	Utilities	17		4,2						
18	Depreciation expense or depletion	18		3,4	42.					
19	Other (list)  Total expenses, Add lines 5 through 19	19								
20	Total expenses. Add lines 5 through 15	20		17,7	03.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b>	21	_	-17,1	03.					
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22		17 <b>,</b> 10		(		)(		)
23a	Total of all amounts reported on line 3 for all rental prope				23a		600	).		
b	Total of all amounts reported on line 4 for all royalty prop	erties			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		,442			
е	Total of all amounts reported on line 20 for all properties				23e	17	<b>,</b> 703	3.		
24	Income. Add positive amounts shown on line 21. Do not	inclu	de any los	sses			. 2	24		
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from line	e 22. Ei	nter to	tal losses her	e <b>2</b>	25 (	17,10	03.)
26	Total rental real estate and royalty income or (loss). Ohere. If Parts II, III, and IV, and line 40 on page 2 do no	t appl	y to you,	also e	nter th	nis amount c				
	Schedule 1 (Form 10/0) line 5. Otherwise include this ar	mount	in the tot	al on li	ne /11	on nage 2	0	6	_17 1	1 U 3