Form <b>8879</b>
(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.

Submission Identification Number (SID)

Taxpay	er's name	Social security nu	mber
SUJ	ITH KUMAR GUNDALA	094-99-66	64
Spouse	's name	Spouse's social se	ecurity number
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you are a	uthorizing.)
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	92,525.
2	Total tax	2	12,616.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	17,730.
4	Amount you want refunded to you	4	5,114.
5	Amount you owe	5	

#### Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

#### Taxpayer's PIN: check one box only

X	I authorize	GLOBAL .	TAXES	ERO firm name	to enter or generate my PIN	E
	La subla a site a			TTO	to out on a second on DINI	

9	6	6	6	4	
Ent dor	er fiv n't er	/e di nter a	gits, all ze	but ros	as my

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 am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

#### Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

		as my
er fiv n't er		

ERO firm name 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 am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►	Da	ate 🕨	•				 			
Practi	tioner PIN Method Returns Only—continue	bel	w							
Part III Certification and Authentie	cation — Practitioner PIN Method Only									
ERO's EFIN/PIN. Enter your six-digit EFIN	followed by your five-digit self-selected PIN.	2	2	 	_	6 0 ter all ze	 	7	1	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨	
ERO Must Re Don't Submit This For	tain This Form — See rm to the IRS Unless		
For Paperwork Reduction Act Notice, see your tax return in	nstructions. PAA	REV 03/07/24 PRO	Form <b>8879</b> (Rev. 01-2021)

<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta>		turn	202	3	OMB No. 1545	-0074	IRS Use Only	y−Do not w	vrite or sta	aple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, enc	ling			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number
SUJITH K		R	GUN	IDALA						094	99	6664
		s first name and middle initial	Last r							Spouse	's socia	I security number
											1	l
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.	Preside	ntial Ele	ection Campaigr
728 LEEV	IARD	PASS									,	ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP co	ode			jointly, want \$3 nd. Checking a
LEANDER						TΣ	x	786	41			not change
Foreign country	name			Foreign p	rovince/state/	count	ty	Foreig	n postal code			0
											Yo	ou 🗌 Spouse
Filing Status	; 🛛	] Single					Head of he	ouseh	old (HOH)			
Check only		] Married filing jointly (even if only o	ne hac	d income)			_					
one box.		] Married filing separately (MFS)							ing spouse	. ,		
		ou checked the MFS box, enter the			pouse. If you	u che	ecked the HOH	l or Q	SS box, ent	er the ch	ild's na	me if the
	qu	alifying person is a child but not you	ır depe	endent:								
Digital	At ar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d, award, or	payr	ment for prope	rty or :	services); oi	r (b) sell,		
Assets		ange, or otherwise dispose of a digi									<b>Y</b>	es 🛛 No
Standard	Som	eone can claim: 🗌 You as a de	pende	ent 🗌	Your spous	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	1					
Age/Blindness	S You	: Were born before January 2, 1	959	Are bl	lind Spo	ouse	: 🗌 Was bor	n befc	ore January	2. 1959		s blind
Dependents				(2) 5	Social security		(3) Relationsh	14			fies for	(see instructions):
If more	•	(1) First name Last name			number		to you		Child tax c	redit	Credit fo	or other dependents
than four												
dependents,												
see instructions and check	s —											
here												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	see instruc	ctions) .					. 1a	1	102,955.
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2.					. 1b	)	
W-2 here. Also	С	Tip income not reported on line 1a	ı (see i	instructions)						. 10	;	
attach Forms W-2G and	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see i	nstru	uctions)			. 1d		
1099-R if tax	е	Taxable dependent care benefits f	rom F	orm 2441,	m Form 8839, line 29					. 1e	•	
was withheld.	f	Employer-provided adoption bene								. 1f		
lf you did not get a Form	g	Wages from Form 8919, line 6 .	· ·					• •		. 1g		
W-2, see	h	Other earned income (see instruction	,				· · · · ·	· ·		. 1h		0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			<b>1</b> i			_		100 055
	<u>z</u>	Add lines 1a through 1h	···		· · ·	· ·		• •		. <u>1</u> z		102,955.
Attach Sch. B if required.	2a	· · -	2a		6.		axable interest			. 2b		
	<u>3a</u>		3a		0.		Ordinary divider			. 3b		б.
Standard	4a -		4a				axable amount			. 4b		
Deduction for—	5a		5a				axable amount		• • •	. 5b		
<ul> <li>Single or Married filing</li> </ul>	6a	, _	6a	mathad			axable amount	[	· · ·	. 6b	)	
separately, \$13,850	с 7	If you elect to use the lump-sum e				•	,	• •	[			80.
<ul> <li>Married filing</li> </ul>	7 8	Capital gain or (loss). Attach Scher Additional income from Schedule		•	•		, CHECK HEIE	• •	!	7 . 8	_	-10,516.
jointly or Qualifying	о 9	Additional income from Schedule Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,					• • • •	• •		· 0		92,525.
surviving spouse, \$27,700	9 10	Add lifes 12, 20, 30, 40, 50, 60, 7, Adjustments to income from Sche					• · · · ·	• •		. 10		<i>, , , , , , , , , , , , , , , , , , , </i>
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is				 ne		• •		. 11		92,525.
\$20,800	12	Standard deduction or itemized								. 12	-	13,850.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deduction		•		'				. 13	-	,000.
Standard Deduction,	14	Add lines 12 and 13								. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is v	our l	taxable incom	ie .		. 15		78,675.
				-,								

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	5)						Page
Tax and	16	Tax (see instructions). Check if any from Form	(s): <b>1</b> 🗌 881/	4 <b>2</b> 4972	3	[1	12,616.
Credits	17	Amount from Schedule 2, line 3				1	17
	18	Add lines 16 and 17				1	18 12,616.
	19	Child tax credit or credit for other dependent	s from Sched	ule 8812		1	19
	20	Amount from Schedule 3, line 8				2	20
	21	Add lines 19 and 20				2	21
	22	Subtract line 21 from line 18. If zero or less,	enter -0			2	12,616.
	23	Other taxes, including self-employment tax,	from Schedule	2, line 21 .		2	23 0.
	24	Add lines 22 and 23. This is your total tax				2	12,616.
Payments	25	Federal income tax withheld from:					
	а	Form(s) W-2			<b>25a</b> 17	,730.	
	b	Form(s) 1099			25b		
	с	Other forms (see instructions)			25c		
	d	Add lines 25a through 25c				2	5d 17,730.
15	26	2023 estimated tax payments and amount a					26
If you have a L qualifying child,	27	Earned income credit (EIC)			27		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812		-	28		
	29	American opportunity credit from Form 8863			29		
	30	Reserved for future use	-		30		
	31	Amount from Schedule 3, line 15			31		
	32	Add lines 27, 28, 29, and 31. These are your			-		32
	33	Add lines 25d, 26, and 32. These are your to	•				<b>33</b> 17,730.
Defund	34	If line 33 is more than line 24, subtract line 24					<b>34</b> 5,114.
Refund	34 35a	Amount of line 34 you want refunded to you					<b>5a</b> 5,114.
Direct deposit?	b	Routing number $\begin{vmatrix} 0 & 5 & 4 \\ 0 & 0 & 0 \end{vmatrix}$				avings	Ja 3,111.
See instructions.	b	Account number 5 3 5 5 0 5 0				avings	
	а 36						
A		Amount of line 34 you want applied to your			36		
Amount You Owe	37	Subtract line 33 from line 24. This is the <b>amo</b> For details on how to pay, go to <i>www.irs.gov</i>					7
Tou Owe	~~				1 1	· · ]	37
	38	Estimated tax penalty (see instructions) .			38		
Third Party		you want to allow another person to disc		n with the IRS?		mplete belo	ow. 🗙 No
Designee		signee's	· · · · · Phone			nal identificat	
	nai	0	no.			er (PIN)	.1011
Sign	Un	der penalties of perjury, I declare that I have examined	d this return and	accompanying sche	edules and statements	s, and to the b	best of my knowledge and
Here	bel	ief, they are true, correct, and complete. Declaration of	of preparer (other	than taxpayer) is b	ased on all information	n of which pre	eparer has any knowledge
пеге	Yo	ur signature	Date	Your occupation		If the IRS	S sent you an Identity
							on PIN, enter it here
Joint return?					PR SPECIALIS		,
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat	ion		S sent your spouse an Protection PIN, enter it he
your records.						(see inst.	,
	Ph	one no. (510)766-0505	Email address			`	
		one no. (510)766-0505 eparer's name Preparer's signat	I	SUUTIU'GONDA	ALA97@GMAIL.CO	PTIN	Check if:
Paid		M PRIYA RAM SAGAR GUPTA SYAM PRIYA		גיייריזי) סגי			
Preparer			A RAM SAG	AR GUPIA	04/14/2024	P020827(	
Use Only		m's name GLOBAL TAXES LLC		T 0001C		Phone no	
		m's address 245 ROONEY CT E BRU	NSWICK NO			Firm's El	
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information.		BAA	REV 03/07/24 PRO		Form <b>1040</b> (202

SCHEDULE	1
(Form 1040)	

SUJ

# Additional Income and Adjustments to Income

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

OMB No. 1545-0074 2023

No. **01** 

number

Department of the Treasury Internal Revenue Service	Attach to Form 1040, 1040-SR, or 1040-NR. Go to <i>www.irs.gov/Form1040</i> for instructions and the latest information.		Attachment Sequence N
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soci	al security
SUJITH KUMAR	GUNDALA	094-99	-6664

1       Taxable refunds, credits, or offsets of state and local income taxes       1         2a       Aimony received       1         bate of original divorce or separation agreement (see instructions):       3         3       Business income or (loss). Attach Schedule C       3         4       Other gains or (losse). Attach Schedule F       5         5       Rental real estate, royalties, partnerships. S corporations, trusts, etc. Attach Schedule E       6         6       Farm income or (loss). Attach Schedule F       6         7       Unemployment compensation       8a (         8       Other income:       8a (         9       Gambling       8a       7         7       Cancellation of debt       8c         6       Foreign earned income exclusion from Form 2555       8d (       7         9       Income from Form 8853       8f       8i       7         1       Activity not engaged in for profit income       8i       8i       7         1       Activity not engaged in for profit income       8i       8i       7         1       Activity not engaged in for profit income       8i       8i       7         1       Activity not engaged in for profit income       8i       8i       7 <th>Par</th> <th>t I Additional Income</th> <th></th> <th></th>	Par	t I Additional Income		
b Date of original divorce or separation agreement (see instructions): 3   3 Business income or (loss). Attach Schedule C 3   4 Other gains or (loss). Attach Schedule F 4   5 Rental real estate, royatiles, partnerships, S corporations, trusts, etc. Attach Schedule E 5   6 Farm income or (loss). Attach Schedule F 5   7 Unemployment compensation 7   8 Other income: 8a (   a Net operating loss 8a (   b Gambling 8b   c Cancellation of debt 8c   d Foreign earned income exclusion from Form 2555 8d (   e Income from Form 8853 8t   f Income from Form 8853 8g   f Jury duty pay 8h   i Prizes and awards 8i   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 8m   i Income from the rental of personal property if you engaged in the rental for profit but were as busines loss adjustment 8g   n Section 951(a) inclusion (see instructions) 8n   s Section 951(a) inclusion (see instructions) 8g   s Set Set   n Section 951(a) inclusion (see instructions) 8g   s Section 951(a) inclusion (see instructions) 8g   s Section 951(a) inclusion (see instructions) 8g   s Section 951(a) inclusion (see instructions) <td< th=""><th>1</th><th>Taxable refunds, credits, or offsets of state and local income taxes</th><th>. 1</th><th></th></td<>	1	Taxable refunds, credits, or offsets of state and local income taxes	. 1	
3       Business income or (loss). Attach Schedule C       3         4       Other gains or (losses). Attach Schedule C       4         5       Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E       5       -10,516.         6       Farm income or (loss). Attach Schedule F       6       7         7       Unemployment compensation       7         8       Other income:       8a (       6         7       Other income:       8a (       7         8       Net operating loss       8a (       7         6       Gambling       8a (       7         7       Bbb       8a (       7         8       Gambling       8a (       7         9       Income from Form 8853       8d (       7         9       Activity not engaged in for profit income       8i       8d (       7         9       Activity not engaged in for profit income       8i       8d (	2a	Alimony received	. 2a	
3       Business income or (loss). Attach Schedule C       3         4       Other gains or (losses). Attach Schedule C       4         5       Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E       5       -10,516.         6       Farm income or (loss). Attach Schedule F       6       7         7       Unemployment compensation       7         8       Other income:       8a (       6         7       Other income:       8a (       7         8       Net operating loss       8a (       7         6       Gambling       8a (       7         7       Bbb       8a (       7         8       Gambling       8a (       7         9       Income from Form 8853       8d (       7         9       Activity not engaged in for profit income       8i       8d (       7         9       Activity not engaged in for profit income       8i       8d (	b	Date of original divorce or separation agreement (see instructions):		
5       Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E       5       -10,516.         6       Farm income or (loss). Attach Schedule F       7         7       0       Bold         8       0       6         9       Other income:       8a (         9       Net operating loss       8a (         0       Gambling       8a (         0       Gambling       8a (         0       Gamedian formed form Form 2555       8d (         0       Foreign earned income exclusion from Form 2555       8d (         9       Alaska Permanent Fund dividends       8g         9       Alaska Permanent Fund dividends       8g         1       Income from Form 8853       8i         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       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       8n         9       Section 951 (4) inclusion (see instructions)       8n         9       Section 951 (4) inclusion (see instructions)       8a         9       Total other income. Add lines 8a through 8z       8a     <	3			
6       Farm income or (loss). Attach Schedule F.       6         7       Unemployment compensation       7         8       Other income:       8a (         a       Net operating loss       8a (         b       Gambling       8b         c       Cancellation of debt       8c         d       Foreign earned income exclusion from Form 2555       8d (         e       Income from Form 8853       8e         g       Alaska Permanent Fund dividends       8e         h       Jury duty pay       8h         i       Prizes and awards       8i         j       Activity not engaged in for profit income       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       8i         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8m         o       Section 951A(a) inclusion (see instructions)       8g         p       Section 951A(a) inclusion (see instructions)       8g         s       Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d       8a         q       Taxable distributions from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan       8a     <	4			
7       Unemployment compensation       7         8       Other income:       8a (         a       Net operating loss       8a (         b       Gambling       8b         c       Cancellation of debt       8c         d       Foreign earned income exclusion from Form 2555       8d (         d       Bet       8e         f       Income from Form 8853       8e         g       Alaska Permanent Fund dividends       8g         h       Jury duty pay       8i         j       Activity not engaged in for profit income       8i         k       Stock options       8k         l       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       8k         l       Income from 51A(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8a         o       Section 951A(a) inclusion (see instructions)       8a         f       Taxable distributions from an ABLE account (see instructions)       8a         s       Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1 a or 1d       8a         t       Pension or annuity from a nonqualifed deferred compensation plan	5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	. 5	-10,516.
8       Other income:       a       ()         a       Net operating loss       b       b         b       Gambling       b       b       b         c       Cancellation of debt       b       b       b         d       Foreign earned income exclusion from Form 2555       b       Bd       d         d       Foreign earned income exclusion from Form 2555       bdd       ddd       ddd         e       Income from Form 8853       bdd       ddd       ddd         f       Income from Form 8853       bdd       dddd       dddddddddddddddddddddddddddddd	6	Farm income or (loss). Attach Schedule F	. 6	
a Net operating loss       Ba ( )         b Gambling       Bb         c Cancellation of debt       Bb         d Foreign earned income exclusion from Form 2555       Bd ( )         e Income from Form 8853       Be         f Income from Form 8853       Be         g Alaska Permanent Fund dividends       Bg         h Jury duty pay       Bh         i Prizes and awards       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Activity not engaged in for profit income       Bi         j Rotal cont of the censis obsta algustment       Bp	7		. 7	
b       Gambling       Bb         c       Cancellation of debt       Bb         d       Foreign earned income exclusion from Form 2555       Bd (         d       Foreign earned income exclusion from Form 2555       Bc         f       Income from Form 8853       Bc         f       Income from Form 8869       Bc         g       Alaska Permanent Fund dividends       Bg         g       Alaska Permanent Fund dividends       Bg         h       Jury duty pay       Bh       Bi         i       Prizes and awards       Bi       Bi         i       Activity not engaged in for profit income       Bi       Bi         i       Activity not engaged in for profit income       Bi       Bi         i       Activity not engaged in for profit income       Bi       Bi         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       Bi       Bi         m       Olympic and Paralympic medals and USOC prize money (see instructions)       Bi       Bi         o       Section 951(a) inclusion (see instructions)       Bi       Bi       Bi         g       Taxable distributions from an ABLE account (see instructions)       Bi	8	Other income:		
c       Cancellation of debt       8c         d       Foreign earned income exclusion from Form 2555       8d (         e       Income from Form 8853       8e         f       Income from Form 8859       8f         g       Alaska Permanent Fund dividends       8g         g       Alaska Permanent Fund dividends       8g         i       Prizes and awards       8i         i       Prizes and awards       8i         j       Activity not engaged in for profit income       8i         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       8i         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8n         n       Section 951(A) inclusion (see instructions)       8n         s       Section 951(A) inclusion (see instructions)       8d         g       Taxable distributions from an ABLE account (see instructions)       8d         g       Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d       8d         u       Wages earned while incarcerated       8t         g       Total other income. Add lines 8a through 8z       9         for combine lines 1 through 7 and 9. This is your additional income. E	а	Net operating loss	)	
d       Foreign earned income exclusion from Form 2555       8d (         e       Income from Form 8853       8f         f       Income from Form 8889       8f         g       Alaska Permanent Fund dividends       8g         h       Jury duty pay       8g         i       Prizes and awards       8i         i       Prizes and awards       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit but were not in the business of renting such property       8i         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       8i         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8m         o       Section 951A(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8n         g       Taxable distributions from an ABLE account (see instructions)       8g         s       Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d       8t         g	b	•		
e       Income from Form 8853       86         f       Income from Form 8889       87         g       Alaska Permanent Fund dividends       8g         h       Jury duty pay       8h         i       Prizes and awards       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit but were not in the business of renting such property       8i         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8m         n       Section 951(a) inclusion (see instructions)       8n         o       Section 951(a) inclusion (see instructions)       8n         g       Taxable distributions from an ABLE account (see instructions)       8n         g       Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d       8n         g       Total other income. List type and amount:       8z         g       Total other income. Add lines 8a through 8z       8u         g       Total other income. Add lines 8a through 8z       10	С			
f       Income from Form 8889       86         g       Alaska Permanent Fund dividends       8g         h       Jury duty pay       8h         i       Prizes and awards       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in the rental for profit but were not in the business of renting such property       8i         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8n         n       Section 951(a) inclusion (see instructions)       8n         o       Section 951(a) inclusion (see instructions)       8n         g       Taxable distributions from an ABLE account (see instructions)       8g         g       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       8u         u       Wages earned while incarc	d		)	
g Alaska Permanent Fund dividends       8g         h Jury duty pay       8h         i Prizes and awards       8i         j Activity not engaged in for profit income       8i         j Activity not engaged in for profit income       8i         j Activity not engaged in for profit income       8i         j Activity not engaged in for profit income       8i         j Activity not engaged in for profit income       8i         k Stock options       8k         l 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       8k         m Olympic and Paralympic medals and USOC prize money (see instructions)       8m         n Section 951(a) inclusion (see instructions)       8n         o Section 951A(a) inclusion (see instructions)       8o         g Taxable distributions from an ABLE account (see instructions)       8g         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 Wages earned while incarcerated       8u         z Other income. List type and amount:       8z         g       Total other income. Add lines 8a through 8z       9         10       Combine lines 1 through 7 and 9. This is your addition	е			
h       Jury duty pay       8h         i       Prizes and awards       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         j       Activity not engaged in for profit income       8i         k       Stock options       8k         l       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       8k         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8m         n       Section 951(a) inclusion (see instructions)       8n         o       Section 461(l) excess business loss adjustment       8o         g       Taxable distributions from an ABLE account (see instructions)       8r         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       8t         u       Wages earned while incarcerated       8t         z       Other income. List type and amount:       8z         g       Total other income. Add lines 8a through 8z       9         10	f			
i       Prizes and awards       8i         j       Activity not engaged in for profit income       8j         k       Stock options       8k         l       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       8k         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8m         n       Section 951(a) inclusion (see instructions)       8n         o       Section 951(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8n         g       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       8t         u       Wages earned while incarcerated       8u         z       Other income. List type and amount:       8z         g       Total other income. Add lines 8a through 8z       9         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       -10, 516.	g	Alaska Permanent Fund dividends		
j Activity not engaged in for profit income   k Stock options   k Stock options   l 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   m Olympic and Paralympic medals and USOC prize money (see instructions)   n Section 951(a) inclusion (see instructions)   n Section 951(a) inclusion (see instructions)   o Section 951A(a) inclusion (see instructions)   p Section 951A(a) inclusion (see instructions)   p Section 461(l) excess business loss adjustment   g Taxable distributions from an ABLE account (see instructions)   r Scholarship and fellowship grants not reported on Form W-2   s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d   u Wages earned while incarcerated   z Other income. List type and amount:   m Wages earned while incarcerated   d State type and amount:   m State type and amount:   m State type and amount:   n State type and amount:   m State type and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8			_	
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       8l         m       Olympic and Paralympic medals and USOC prize money (see instructions)       8n         n       Section 951(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8n         g       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       8t         u       Wages earned while incarcerated       8u       8u         z       Other income. List type and amount:       8z       9         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       10       -10, 516.	i		_	
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)       81         n       Section 951(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8n         p       Section 951A(a) inclusion (see instructions)       8n         g       Taxable distributions from an ABLE account (see instructions)       8g         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       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 here and on Form 1040, 1040-SR, or 1040-NR, line 8       -10, 516.	j		_	
for profit but were not in the business of renting such property       8         m Olympic and Paralympic medals and USOC prize money (see instructions)       8         n Section 951(a) inclusion (see instructions)       8         o Section 951A(a) inclusion (see instructions)       8         p Section 461(l) excess business loss adjustment       80         g Taxable distributions from an ABLE account (see instructions)       8         r Scholarship and fellowship grants not reported on Form W-2       8         r Scholarship and fellowship grants not reported on Form W-2       8         10 Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan       8         u Wages earned while incarcerated       8         z Other income. List type and amount:       8         9 Total other income. Add lines 8a through 8z       9         10 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       10	k			
m       Olympic and Paralympic medals and USOC prize money (see instructions)       8m         n       Section 951(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8n         o       Section 951A(a) inclusion (see instructions)       8o         p       Section 461(l) 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       8u         z       Other income. List type and amount:       8z       9         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       -10, 516.	I			
instructions)       8m         n       Section 951(a) inclusion (see instructions)         o       Section 951A(a) inclusion (see instructions)         o       Section 951A(a) inclusion (see instructions)         p       Section 461(l) excess business loss adjustment         q       Taxable distributions from an ABLE account (see instructions)         q       Taxable distributions from an ABLE account (see instructions)         r       Scholarship and fellowship grants not reported on Form W-2         s       Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d         10       Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan         u       Wages earned while incarcerated         y       Total other income. Add lines 8a through 8z         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8				
n       Section 951(a) inclusion (see instructions)       8n       8n         o       Section 951A(a) inclusion (see instructions)       8o       8o         p       Section 461(l) excess business loss adjustment       8p       8q         q       Taxable distributions from an ABLE account (see instructions)       8q       8q         r       Scholarship and fellowship grants not reported on Form W-2       8r       8r         s       Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d       8s (       9         t       Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan       8t       8u       8z         g       Total other income. List type and amount:       8z       9       9       10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       -10, 516.       10       -10, 516.	m			
o       Section 951A(a) inclusion (see instructions)       80         p       Section 461(l) 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       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 here and on Form 1040, 1040-SR, or 1040-NR, line 8       9			_	
p       Section 461(l) 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       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 here and on Form 1040, 1040-SR, or 1040-NR, line 8       9	n			
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:       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 here and on Form 1040, 1040-SR, or 1040-NR, line 8       9	-			
<ul> <li>r Scholarship and fellowship grants not reported on Form W-2</li> <li>s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d</li></ul>	р			
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       8t         u       Wages earned while incarcerated       8u       8u       8u         other income. List type and amount:       8z       9       Total other income. Add lines 8a through 8z       9       9       Total other income. Add lines 8a through 8z       9       10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       9       -10, 516.	•		_	
1040, line 1a or 1d       10       10       10, line 1a or 1d       10 <th></th> <th></th> <th></th> <th></th>				
t       Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan       8t       8t         u       Wages earned while incarcerated        8u       8u       8u         z       Other income. List type and amount:       8z       9       8z       9         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       9       -10, 516.	S			
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 here and on Form 1040, 1040-SR, or 1040-NR, line 8       9				
u       Wages earned while incarcerated       8u       8u         z       Other income. List type and amount:       8z       9         9       Total other income. Add lines 8a through 8z       9       9         10       Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8       9	t			
z       Other income. List type and amount:       8z       9         9       Total other income. Add lines 8a through 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 here and on Form 1040, 1040-SR, or 1040-NR, line 8       9				
9       Total other income. Add lines 8a through 8z	Z	Uther Income. List type and amount:		
10Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 810-10, 516.	~			4
1040, 1040-SR, or 1040-NR, line 8				
	10			_10 516
	For Po			

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	s 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:			
 a	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			
Ŭ	and USOC prize money reported on line 8m			
d			-	
e	Repayment of supplemental unemployment benefits under the Trade		-	
e	Act of 1974			
4			-	
f			-	
g	Contributions by certain chaplains to section 403(b) plans		-	
n	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         .         .         .         .         24j			
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			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REVO	3/07/24 PRO	Schedule 1 (F	orm 1040) 202

### SCHEDULE D (Form 1040)

# **Capital Gains and Losses**

OMB No. 1545-0074

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.

20**23** Attachment Sequence No. **12** 

Internal Revenue Service Name(s) shown on return

Department of the Treasury

SUJITH KUMAR GUNDALA

Your social security number

094-99-6664

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? 
Yes X No
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)

lines	instructions for how to figure the amounts to enter on the below.	<b>(d)</b> Proceeds	<b>(e)</b> Cost	<b>(g)</b> Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum		combine the result with column (g)
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 <b>Box A</b> checked	215.	135.			80.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions		•	-	6	( )
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	• •		7	80.

### Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

lines	instructions for how to figure the amounts to enter on the below.	<b>(d)</b> Proceeds	(e) Cost	<b>(g)</b> Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
This who	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	combine the result with column (g)
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 <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		• •	• •	11	
	Net long-term gain or (loss) from partnerships, S corporat				12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	-	-	-	14	( )
15	Net long-term capital gain or (loss). Combine lines 8a on the back	•			15	

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	80.
	• If line 16 is a <b>gain</b> , 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.		
	• If line 16 is <b>zero</b> , 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 <b>both</b> gains?		
	No. Skip lines 18 through 21, and go to line 22.		
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18	
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19	
20	<ul> <li>Are lines 18 and 19 both zero or blank and you are not filing Form 4952?</li> <li>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.</li> </ul>		
	□ 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:		
	<ul> <li>The loss on line 16; or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	21 (	)
	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.		
	<b>No.</b> Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

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Schedule D (Form 1040) 2023

<u>8949</u>

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.

Social security number or taxpayer identification number Name(s) shown on return 094-99-6664 SUJITH KUMAR GUNDALA

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.

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

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

(C) Short-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property	(b) (c) Date acquired disposed of			<b>(e)</b> Cost or other basis See the <b>Note</b> below	If you enter an enter a co	f <b>any, to gain or loss</b> amount in column (g), ode in column (f). <b>arate instructions.</b>	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).	
Robinhood Securities LLC	01/01/23	12/31/23	215.	135.			80.	
2 Totals. Add the amounts in column negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box A	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	215.	135.			80.	

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.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

SCHEDULE	Ε
(Form 1040)	

### **Supplemental Income and Loss**

OMB No. 1545-0074

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

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

Department of the Treasury	
Internal Revenue Service	Go t

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

2023	
Attachment Sequence No. <b>13</b>	

	) snown on return	JDALA							4-99-666	-	er
Part		Loss From Rental Real Estate an	d Do	voltion				09	4-99-000	4	
Fall	Note: If you ar	re in the business of renting personal proper or loss from <b>Form 4835</b> on page 2, line 40.	rty, use	e Schedule	<b>C</b> . See	e instru	ctions. If you	are ar	n individual, re	∍port fa	ırm
<b>A</b> [	Did you make any pa	ayments in 2023 that would require you	ı to file	Form(s) 10	099? 8	See ins	structions .		🗆 Y	/es 🛛	< No
B	f "Yes," did you or v	will you file required Form(s) 1099? .							🗆 Y	/es 🛛	No
1a		of each property (street, city, state, ZI									
		RABAD TELANGANA IN 501511		- /							
A B	KOREDA HIDER	CABAD IELANGANA IN SUISII									
C											
1b	Type of Property	2 For each rental real estate prope	orty lie	tod		Ea	ir Rental	Po	rsonal Use		
10	(from list below)	above, report the number of fair				10	Days	Fe	Days	0	QJV
Α	3	personal use days. Check the Q	JV bo	x only	Α		365		0		$\square$
В		if you meet the requirements to t			B					-	$\overline{\Box}$
С		qualified joint venture. See instru	uctions	s. –	C						$\overline{\Box}$
	of Property:				-						
	Single Family Resid	lence 3 Vacation/Short-Term Ren	ntal	5 Land		7	Self-Rental				
	Multi-Family Reside			6 Royal	ties	8	Other (desc	cribe)			
	,, <b>,</b>			,		-					
ncon	20.				A		Propert	ies:		С	
3			3			27.					
4			4								
Exper											
 5			5								
6		ee instructions)	6								
7			7		1.0	11.					
8		· · · · · · · · · · · · · · · · ·	8		1,0						
9			9								
10		rofessional fees	10								
11			11		9	20.					
12		paid to banks, etc. (see instructions)	12			20.					
13		· · · · · · · · · · · · · · · · · · ·	13								
14			14		2,0	14.					
15			15			63.					
16			16		,						
17			17		1,8	63.					
18		ense or depletion	18			72.					
19			19								
20	Total expenses. A	dd lines 5 through 19	20		11,1	.43.					-
21		om line 3 (rents) and/or 4 (royalties). If									
		ee instructions to find out if you must									
	file Form 6198 .		21	-	10,5	16.					
22		real estate loss after limitation, if any, e instructions)	22	( 1	10,51	L6.)	(		)(		
23a	Total of all amoun	ts reported on line 3 for all rental prope	erties			23a		62	27.		
b		ts reported on line 4 for all royalty prop				23b					
С	Total of all amoun	ts reported on line 12 for all properties				23c					
d	Total of all amoun	ts reported on line 18 for all properties				23d		3,87			
е	Total of all amoun	ts reported on line 20 for all properties				23e	1	1,14	3.		
24		tive amounts shown on line 21. <b>Do no</b> t						- H	24		
25	Losses. Add royalt	y losses from line 21 and rental real estat	te loss	es from line	e 22. E	nter to	tal losses he	re	25 (	10,	516.
26		estate and royalty income or (loss).									
		l, and IV, and line 40 on page 2 do no 1040), line 5. Otherwise, include this a							26	-10	,516

orm <b>858</b>	<b>?7</b>	Pa	assive Activi	O	OMB No. 1545-1008				
			See sepa		2023				
partment of the			Attach to Form	Attachment					
rnal Revenue		Go to www.i	rs.gov/Form8582 fo	or instructions and	the latest info	ormatio			equence No. 858
ne(s) shown JJITH K		א דארוואוזי						itifying nι 4−99−	
Part I		GUNDALA Assive Activity Loss					09	4-99-	0004
artr		: Complete Parts IV ar		eting Part I					
ntal Paal		ctivities With Active Pa	· · · · · ·		ivo participat	ion co	o Special		
		Real Estate Activities	• •		ive participat	.1011, 56	e Special		
		net income (enter the a			<b>1</b> a		0.		
		net loss (enter the amo				(	10,516.	)	
		allowed losses (enter th				(		$\frac{2}{3}$	
								1d	-10,516.
Other Pa	assive Ac	tivities							
a Activ	ities with i	net income (enter the a	mount from Part V	. column (a))	2a				
		net loss (enter the amo				(		)	
c Prior	years' una	allowed losses (enter th	ne amount from Pa	rt V, column (c))	<b>2c</b>	(		)	
d Com	bine lines	2a, 2b, and 2c						2d	
zero	or more,	1d and 2d and subtra stop here and include lowed losses entered o	this form with you on line 1c or 2c. F	ur return; all losse Report the losses	es are allowe on the forms	d, incl	luding any	3	-10,516.
						• • •		3	-10,510.
norm If line ution: If y t II. Inste	9 3 is a los /our filing ad, go to l	status is married filing	oss (and line 1d is separately and yo	ou lived with your	spouse at ar	ny tim	e during the	e year,	do not comple <sup>.</sup>
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Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

	Name of activity	Curr	ent year		Prior years		s Overall gain or loss			
	Name of activity		e <b>(b)</b>	Net loss ne 2b)	(c) Unal loss (lin	lowed	<b>(d)</b> Gain		(e) Loss	
		(line 2a)		116 2.0)	1055 (111	e 20)				
Fatal Fatar	an David Lines On Oh, and On									
Part VI	on Part I, lines 2a, 2b, and 2c Use This Part if an Amo		Dort II	Lino 0 S	oo instruc	otione				
			-	Line 9. 3						
	Name of activity	Form or schedu and line numbe to be reported o (see instructions	r (a	<b>(a)</b> Loss		atio	<b>(c)</b> Special allowance	co	<b>(d)</b> Subtract olumn (c) from column (a).	
KOHEDA		E Ln 22		10,516.	1.0000	0000	10,51	6.	0.	
Total .				10,516.	1.0	0	10,51	6.	0.	
Part VII	Allocation of Unallowed	d Losses. See ins				•		•••		
	Name of activity	Form or so and line n to be repo (see instru	umber rted on	(a) I	_OSS	(	<b>b)</b> Ratio	<b>(c)</b> U	nallowed loss	
Total .							4.00			
Part VIII	Allowed Losses. See ins	<u></u> structions					1.00			
		Form or so	bodulo							
	Name of activity	and line n to be repo (see instru	umber rted on	(a) I	_oss	<b>(b)</b> Ur	allowed loss	(c) /	Allowed loss	
						1				

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Form **8582** (2023)