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

Subm	nission Identification Number (SID)					
Taxpay	ver's name	Social securit	y number			
KRI	SHNA REDDY GAVVA	630-08-	-2525			
Spouse	e's name	Spouse's soc	pouse's social security number			
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r year you a	re authorizi	ing.)		
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	78,204.		
2	Total tax		2	9,470.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	17,421.		
4	Amount you want refunded to you		4	7,951.		
5	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of your r	eturn)		
return to sen for any Agent payme author payme busine taxes persor	considered and belief, it is true, correct, and complete. I further declare that the amounts in Part I abort (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transferd my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for responsing the return or refund, and (c) the date of any refund. If applicable, I authorize the loto initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account interest of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminal ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation receive days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the half identification number (PIN) below is my signature for the income tax return (original or amended) I sonic Funds Withdrawal Consent.	nitter, or electro- jection of the tr J.S. Treasury and dicated in the ta- ion to debit the te the authoriza- quests must be e processing of payment. I furt	nic return oriansmission, (nd its designation entry to this a received no the electroni her acknowle	ginator (ERO) b) the reason ated Financial a software for account. This like (cancel) a later than 2 c payment of edge that the		
	ayer's PIN: check one box only					
	▼ I authorize GLOBAL TAXES LLC to enter or generate	my PIN	2 5 2	$\frac{5}{}$ as my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, t n't enter all zer	out		
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.					
Your	signature ▶ Date ▶					
Snou	se's PIN: check one box only					
Г	☐ I authorize to enter or generate	my DINI		as my		
	ERO firm name	,	er five digits. k			
	signature on the income tax return (original or amended) I am now authorizing.	doı	n't enter all zer	os		
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.					
Spou	se's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below	V				
Part	Certification and Authentication — Practitioner PIN Method Only					
ERO'	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 0 8 2 er all zeros	7 1		
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subjected in the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of	nitting this retu	rn in accorda	ance with the		
EDO'	s signature ▶ Date ▶					
LNU	s signature ► Date ► ERO Must Retain This Form — See Instructions					
	ENU IVIUSI RETAIN TIIIS FORM — See INSTRUCTIONS					

Don't Submit This Form to the IRS Unless Requested To Do So

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



<u>• 1 U40</u>	U.	S. Individual Income Tax	x Retu	urn 4) Z 3	OMB No. 1545	5-0074	IRS Use	Only—	Do not w	rite or stap	le in this space.	
For the year Ja	n. 1–De	c. 31, 2023, or other tax year beginning		, 202	23, ending			, 20		See sep	arate in	structions.	
Your first name	e and m	niddle initial	Last nar	me)	our so	cial secu	rity number	
_KRISHNA	RED	DY	GAVV.	A						630	08	2525	
If joint return, s	spouse'	s first name and middle initial	Last nar	me					5	Spouse's	s social s	security numb	oer
										736	72	3230	
Home address	(numb	er and street). If you have a P.O. box, see	instruction	ons.			A	Apt. no.	F	Presider	ntial Elec	tion Campai	gr
_1325 CO	OKS	COURT										u, or your	
City, town, or p	oost off	ice. If you have a foreign address, also co	mplete sp	paces below.	S	tate	ZIP c	ode	- 1		Ο,	ointly, want \$ d. Checking a	
BRENTWO	OD				r	'N	370	27		•		ot change	а
Foreign countr	y name	•	F	oreign province/	state/cou	nty	Forei	gn postal co	ode y	our tax	or refun	d	
											∐ You	ı Spou	se
Filing Status	s 🗆	Single				☐ Head of h	ouseh	old (HOH	l)				
Check only		Married filing jointly (even if only o	ne had ir	ncome)									
one box.	\geq	Married filing separately (MFS)				Qualifying	survi	ving spou	ıse (Q	SS)			
		you checked the MFS box, enter the			•		H or Q	SS box, e	enter :	the chil	d's nam	ne if the	
	qι	ualifying person is a child but not you	ır depen	dent: JHANS	SI L (GAYAM							_
 Digital	Δta	ny time during 2023, did you: (a) rec	oive (as s	a reward awar	d or na	vment for prope	rtv or	services):	. or (h	المء (د			_
Assets		nange, or otherwise dispose of a dig					-				Yes	s 🗵 No	
Standard		neone can claim: You as a de		<u> </u>		s a dependent				-/			_
Deduction	_	Spouse itemizes on a separate retur	•			•							
					tatao and								_
Age/Blindnes	s You	: Were born before January 2, 1	959 _	☐ Are blind ☐	Spous	e: Was bo		ore Janua				blind	
Dependent	s (see	instructions):		(2) Social se		(3) Relationsh	nip (4	•			•	ee instruction	,
If more	(1) F	First name Last name		numbe	er	to you		Child ta	ax cred	dit	Credit for	other depender	nts
than four								<u>L</u>	ᆜ			<u> Ш</u>	
dependents, see instruction	ıs —												
and check	, —							L	<u> </u>			ᆜ	
here L								L					
Income	1a	Total amount from Form(s) W-2, b	,	,						1a	-	114,283	•
Attach Form(s)	b	Household employee wages not re	•							1b			
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)								1c			
attach Forms W-2G and	d	Medicaid waiver payments not rep				ructions)				1d			
1099-R if tax	е	Taxable dependent care benefits f								1e			
was withheld.	f	Employer-provided adoption bene	fits from	ı Form 8839, lir	ne 29					1f			
If you did not get a Form	g	Wages from Form 8919, line 6 .								1g			
W-2, see	h	Other earned income (see instruct	,							1h	1	0	<u>.</u>
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		<u>1</u> i	I				.	11/ 202	
		Add lines 1a through 1h	· · ·		i .					1z	+ -	114 , 283 371	
Attach Sch. B if required.	2a	· –	2a			Taxable interes				2b		3/1	<u>.</u>
roquirou.	3a_	· ·	3a		_	Ordinary divide				3b			
Standard	4a		4a	56 020		Taxable amoun				4b			_
Deduction for—	5a	-	5a	56,828.	_	Taxable amoun			LOVE			0	-
Single or Married filing	6a	,	6a		_	Taxable amoun				6b	-		_
separately, \$13,850	C	If you elect to use the lump-sum e		•	`	,			. 님	_		1 500	
Married filing	7	Capital gain or (loss). Attach Sche		•	•	•			. Ш	7	1	-1,500	
jointly or Qualifying	8	Additional income from Schedule								8	+	-34 , 950	
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-						9	1	78,204	<u>.</u>
\$27,700 Head of	10	Adjustments to income from Sche								10	1	70 001	_
household, \$20,800	11	Subtract line 10 from line 9. This is	-							11	1	78,204	
If you checked	12	Standard deduction or itemized								12	1	13,850	•
any box under Standard	13	Qualified business income deduct								13	1	12 050	_
Deduction, see instructions.	14	Add lines 12 and 13								14		13,850	•

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check if	any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	9,470.	
Credits	17	Amount from Schedule 2, line	3					17		
	18	Add lines 16 and 17	es 16 and 17						9,470.	
	19	Child tax credit or credit for of	ther dependent	s from Sched	ule 8812			19		
	20	Amount from Schedule 3, line	8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18. I	If zero or less,	enter -0				22	9,470.	
	23	Other taxes, including self-em	ployment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is yo	our total tax					24	9,470.	
Payments	25	Federal income tax withheld for	rom:							
-	а	Form(s) W-2				25a 17	7,421.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c .						25d	17,421.	
If you have a	26	2023 estimated tax payments	and amount ap	oplied from 20	122 return			26		
qualifying child,	27	Earned income credit (EIC) .				27				
attach Sch. EIC.	28	Additional child tax credit from	Schedule 8812			28				
	29	American opportunity credit fr	rom Form 8863	, line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line								
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits								
	33	Add lines 25d, 26, and 32. The	ese are your to	tal payments				33	17,421.	
Refund	34	If line 33 is more than line 24,	subtract line 24	4 from line 33.	This is the amour	nt you overpaid		34	7,951.	
	35a	Amount of line 34 you want re	efunded to you	ı. If Form 8888	is attached, chec	k here	🗆	35a	7,951.	
Direct deposit?	b	Routing number 2 1 1		2 5	c Type: 🛛	Checking	Savings			
See instructions.	d	Account number 1 3 9	7 3 2 8	4						
	36	Amount of line 34 you want ar	oplied 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 ins	structions) .			38				
Third Party		you want to allow another p								
Designee		structions					•		⊠ No	
		signee's me		Phone no.			onal ident ber (PIN)	itication		
Sign	Un	der penalties of perjury, I declare tha	at I have examined	this return and	accompanying sched	dules and statemen	its, and to	the best	of my knowledge and	
Here	be	lief, they are true, correct, and compl	lete. Declaration of	of preparer (other	r than taxpayer) is ba	sed on all informati	on of whic	h prepar	er has any knowledge.	
Here	Yo	Your signature		Date Your occupation					nt you an Identity	
								tection P inst.)	IN, enter it here	
Joint return? See instructions.		avenie aigenture. If a jaint vature ha	Alle mouset siem	Data	SOFTWARE E		,		nt	
Keep a copy for your records.	Spouse's signature. If a joint return, both must sign.		Date Spouse's occupation				If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)			
		one no. (408) 859-5301		Email address	RDIGUMA CAU	NINGCMATT C				
			Preparer's signat		KRISHNA.GAV	Date	PTIN		Check if:	
Paid		·			מווסיים יים די זא א	03/07/2024	P0208	2703	Self-employed	
Preparer								Phone no. (678) 965-9522		
Use Only									· · · · · · · · · · · · · · · · · · ·	
<u> </u>	/F	m saucess 240 NOONET	CI E DRU	TANATOI/ IN	0 00010		Fill	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

KRISHNA REDDY GAVVA

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

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

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

Your social security number 630-08-2525

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. Att	ach Schedule E .	5	-34,950.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
s	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (
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 . Ente		10	-34 950

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b		_	
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c		_	
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e		-	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful	041			
	discrimination claims (see instructions)	24h		-	
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect tax law violations	04:			
	Housing deduction from Form 2555	24i 24j		-	
J	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24j		-	
k		24k			
_	1041)	24K			
Z		24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income			23	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		23/24 PRO		le 1 (Form 1040) 2023
	BAA	1\L'V UZ/	LUIZA FINO		

SCHEDULE D (Form 1040)

Department of the Treasury

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

2023

Attachment Sequence No. **12**

Internal Revenue Service Name(s) shown on return Your social security number 630-08-2525 KRISHNA REDDY GAVVA 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 2,277. 1,604. 673. 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 9,081.) 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -8,408. 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 6,071. 5,001. -1,070.9 Totals for all transactions reported on Form(s) 8949 with **Box E** checked

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

-1,070.

11

12

13

14

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -9,478. • 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 21 1,500.) • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Go to www.irs.gov/Form8949 for instructions and the latest information.

2023 Attachment Sequence No. 12A

OMB No. 1545-0074

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

Social security number or taxpayer identification number

630-08-2525

KRISHNA REDDY GAVVA

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, *or* C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

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

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

(C) Short-term transaction	s not reported	d to you on F	orm 1099-B				
1 (a) Description of property	(b) (c) Date so	Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, if If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD CRYPTO LLC	01/01/23	12/31/23	2,277.	1,604.			673.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A abov above is checked), or line 3 (if Box	al here and ince e is checked), li i	lude on your ne 2 (if Box B	2,277.	1,604.			673.

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 KRISHNA REDDY GAVVA

Social security number or taxpayer identification number 630-08-2525

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.

☐ (F) Long-term transactions	not reported	to you on Fo	MIII 1099-B			f any, to gain or loss amount in column (g),	
(a) Description of property	(b) Date acquired	Date sold or disposed of (Mo., day, yr.) (see instructions) See the Note and see <i>Colur</i> in the separation in the sep		Cost or other basis See the Note below	enter a co	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)		and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).	
ROBINHOOD CRYPTO LLC	01/01/22	12/31/23	5,001.	6,071.			-1,070.
2 Totals. Add the amounts in column negative amounts). Enter each total Schedule D. line 8h (if Box D above	al here and inc	lude on your					

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

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

-1,070.

5,001.

6,071.

Schedul	e E (Form 1040) 2023		Attachr	nent Seque	nce No. 13					Page	
Vame(s)	shown on return. Do not enter name and soci	al security number i	if shown on oth	er side.			You	r socia	I security	number	
	HNA REDDY GAVVA							30-08	3-2525		
	n: The IRS compares amounts repo					on Schedule(s) K-1.				
Part	Income or Loss From Pai Note: If you report a loss, receive the box in column (e) on line 28 a amount is not at risk, you must c	a distribution, dine	spose of stoouried basis of	ck, or rece omputatio	ive a loan n. If you re	eport a loss fron	n an at-ri	sk acti			
27	Are you reporting any loss not allo passive activity (if that loss was no	wed in a prior y	ear due to	the at-ris	sk or basi	s limitations, a	a prior y	/ear ui			
	see instructions before completing		•			<u> </u>	•	•		res ⊠ No	
28	(a) Name		(b) Enter P f partnership; for S corpora	S for	heck if eign ership	(d) Employer identification num	nber ba	(e) Check if basis computation is required		(f) Check if any amount is not at risk	
Α	DIGITAL TRANSFORMERS IN	C	S			88-362232	2.4				
В											
С								<u>_</u> _			
D								<u></u> _			
	Passive Income and (g) Passive loss allowed	th) Passive income	i) No	npassive Ic		npassive Inco				assive income	
	(attach Form 8582 if required)	from Schedule K-1		see Sched u		deduction fro				hedule K-1	
Α				3	4,950.						
В								\longrightarrow			
С											
D	Tatala							_			
29a b	Totals Totals				4 0 5 0						
30	Add columns (h) and (k) of line 29a				4,950.	-		30			
31	Add columns (g), (i), and (j) of line 2							31 (34,950.	
32	Total partnership and S corporat					31	: : :	32		-34 , 950.	
Part										<u> </u>	
33		(a) N	lame					ic	(b) Emp dentificatio		
A											
В	Deseive less			1		Namasai					
	(c) Passive deduction or loss allowed	me and Loss	(d) Passive income (e) Deduction or loss					e Income and Loss (f) Other income from			
	(attach Form 8582 if required)		from Schedule K-1 from Schedule K-1					Schedule K-1			
Α											
В											
b 35	Totals Add columns (d) and (f) of line 34a							35			
36	Add columns (c) and (e) of line 34b							36 (
37	Total estate and trust income or	(loss). Combine	e lines 35 a	 nd 36 .				37			
Part I					t Condu	its (REMICs)—Res		Holde	r	
38	(a) Name		Employer ation number	Sched	ss inclusion lules Q, line instructions	2c (net l	able incomoss) from les Q , line			come from les Q , line 3b	
				<u> </u>							
39	Combine columns (d) and (e) only.	Enter the result	here and ir	clude in	the total	on line 41 belo	w .	39			
Part	-										
40	Net farm rental income or (loss) from							40			
41	Total income or (loss). Combine lin 1 (Form 1040), line 5	nes 26, 32, 37, 3	39, and 40.	Enter the	result he	re and on Sch	edule 	41		-34 , 950.	
42	Reconciliation of farming and farming and fishing income reporter	d on Form 4835	5, line 7; Scl	nedule K-	1						
	(Form 1065), box 14, code B; Sched AN; and Schedule K-1 (Form 1041),				le . 42						

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Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated