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)

Taxpaver's name

Taxpay	er's name	Social security nur	lber
SRE	E BHARATH REDDY BURRI	798-74-468	86
Spouse	's name	Spouse's social see	curity number
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r year you are au	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	87,445.
2	Total tax	2	11,494.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	16,829.
4	Amount you want refunded to you	4	5,335.
5		5	

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

Under penalties of perjury, 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

				FBO firm name	-	Ē
X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	<u> </u>
			-			14

4	4	6	8	6	00 mV
Ent don	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	ontor	or	generate	mv	DIN
ιο	enter	or	generate	шу	PIIN

Enter five digits, but don't enter all zeros

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.

Du											
Practitioner PIN Method Returns Only—continue below											
nly											
1.	2	2							2	7	1
	inue nly	inue bele nly	nly	inue below nly	inue below hly J. 2 2 2 4	inue below hly J. 2 2 2 4 9	inue below hly J. 2 2 2 4 9 6	inue below Ily J. 2 2 2 4 9 6 0	inue below hly	inue below Ily I. 2 2 2 4 9 6 0 8 2	inue below Inly J. 2 2 2 4 9 6 0 8 2 7

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 >							
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So							
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 02/23/24 PRO	Form 8879 (Rev. 01-2021)				

1040		artment of the Treasury—Internal Revenue Service S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use Onl	y—Do not w	vrite or staple	in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, enc	ding			, 20	See se	parate inst	tructions.
Your first name	and m	iddle initial	Last r	ame						Your so	cial securi	ty number
SREE BHA	ARATI	H REDDY	BUR	RI						798	74 4	686
		s first name and middle initial	Last r									curity number
										080	95 1	711
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.		• •	on Campaign
812 VER <i>A</i>		VIEW									here if you,	
		ice. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP c	ode	· ·		ntly, want \$3
MCKINNEY	Z					TX	< X	750	69	· · ·	o this fund. low will not	Checking a
Foreign country				Foreign p	rovince/state/	count	ty		in postal code		x or refund.	
											🗌 You	Spouse
Filing Status	; [Single					Head of h	ouseh	old (HOH)			
Check only] Married filing jointly (even if only or	ne had	l income)								
one box.	X	Married filing separately (MFS)					Qualifying	surviv	ving spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name	of your s	pouse. If you	u che	ecked the HOH	l or Q	SS box, ent	er the ch	ild's name	if the
	qu	alifying person is a child but not you	r depe	endent: I	RAKSHITH	IA I	RAVULA					
Divital	At a	ny time during 2023, did you: (a) rece	aiva (a	e a roward	d award or	navr	ment for prope	rty or	services); o	r (b) sell		
Digital Assets		hange, or otherwise dispose of a digi	•					•	,	. ,	Yes	🗙 No
Standard		neone can claim: You as a de					a dependent					
Deduction	_	Spouse itemizes on a separate return			•		·					
Age/Blindness	s You	: Were born before January 2, 19	959	Are bl	lind Soc	ouse	• 🗌 Was bo	rn befr	ore January	2 1959	🗌 ls bl	lind
Dependent				<u> </u>	Social security		(3) Relationsh	14				e instructions):
•		First name Last name		(2)	number	/	to you		Child tax of		i ,	her dependents
lf more than four												\square
dependents,												\square
see instructions and check	s —											\square
here]											
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (s	ee instruc	ctions) .					. 1a	1	02,542.
	b	Household employee wages not re	porte	d on Form	n(s) W-2 .					. 1b		
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	(see i	nstruction	ns)					. 10	;	
attach Forms	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see i	nstru	uctions)			. 1d	1	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	orm 2441,	, line 26					. 1e	,	
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8	839, line 29					. 1f		
If you did not	g	Wages from Form 8919, line 6 .								. 1g	J	
get a Form W-2, see	h	Other earned income (see instructi	ons)							. 1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)			1 i	i				
	z	Add lines 1a through 1h .	. <u>.</u>		<u>.</u>					. 1z	. 10	02,542.
Attach Sch. B	2a	Tax-exempt interest	2a				axable interes			. 2b	,	3.
if required.	3a		3a			b C	Ordinary divide	nds .		. 3b	,	
Standard	4a		4a				axable amoun			. 4b	,	
Standard Deduction for—	5a	Pensions and annuities	5a			bΤ	axable amoun	t		. 5b	,	
Single or Married filing	6a	, _	6a				axable amoun	t		. 6b	,	
Married filing separately,	С	If you elect to use the lump-sum el		· ·		`	,					
\$13,850 • Married filing	7	Capital gain or (loss). Attach Scheo		•						7		-279.
jointly or Qualifying	8	Additional income from Schedule 1								. 8		14,821.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-	our total ind	come	e			. 9		87,445.
\$27,700 • Head of	10	Adjustments to income from Schee								. 10		
household, \$20,800	11	Subtract line 10 from line 9. This is	•	-	-					. 11		87,445.
• If you checked	12	Standard deduction or itemized								. 12		13,850.
any box under Standard	13	Qualified business income deducti	on fro	m Form 8	995 or Form	n 899	95-A			. 13	-	10 07 -
Deduction, see instructions.	14	Add lines 12 and 13		•••						. 14		13,850.
	15	Subtract line 14 from line 11. If zer	o or le	ss, enter	-0 This is y	our 1	taxable incom	ne .		. 15		73,595.

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

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	11,494.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	11,494.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	11,494.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	11,494.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 10	5,829.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	16,829.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20)22 return			26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30		1	
	31	Amount from Schedule 3, lin	e15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	16,829.
Refund	34	If line 33 is more than line 24	l, subtract line 24	4 from line 33.	This is the amou	nt you overpaid		34	5,335.
	35a	Amount of line 34 you want			3 is attached, che	ck here	🗆	35a	5,335.
Direct deposit?	b	Routing number 0 1 1] Checking 🛛	Savings		
See instructions.	d	Account number 3 8 5	0 2 0 2	2 5 4 7	7 0				
	36	Amount of line 34 you want a	applied to your	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe					
You Owe		For details on how to pay, g	o to <i>www.irs.gov</i>	//Payments or	see instructions			37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	uss this retu	rn with the IRS?	See			_
Designee	ins	tructions				🗌 Yes. C	omplete k	pelow.	× No
	De nai	signee's		Phone no.			onal identi ber (PIN)	ication	
Ciarra		der penalties of perjury, I declare tl	nat I have examined		accompanying sch		. ,	he hest	of my knowledge and
Sign		ief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the	IRS sei	nt you an Identity
							Prote	ection P	IN, enter it here
Joint return?					RF ENGINEER (S			inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an
your records.				lder (see					ection PIN, enter it here
	Ph	one no. (512) 975-041	7	Email address		ACMATT COM		,	
		one no. (512) 975-041 parer's name	/ Preparer's signat		DOKKIOJIO	GMAIL.COM	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM					P02082	2703	Self-employed
Preparer		n's name GLOBAL TAX		IVIN DAGAR	GOLIA IALLAM	05/07/2024	· · · ·		678) 965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816			's EIN	84-3171965
Go to www.irs.cr		1040 for instructions and the late		TADAATOIN IN					Form 1040 (2023)
GO 10 WWW.IIS.90		noro for instructions and the late	scanornation.		BAA	REV 02/23/24 PRO			1 0mm 10-to (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 2023

Attachment Sequence No. **01**

Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SREE BHARATH REDDY BURRI 798-74-4686

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	-14,821.
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		
	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			
		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	Total other income. Add lince the through the	8z	0	
9 10	Total other income. Add lines 8a through 8z		9	
	1040, 1040-SR, or 1040-NR, line 8		10	-14,821.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	le 1 (Form 1040) 2023

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	-basi	s gove	rnment		
	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		24a				
b	Deductible expenses related to income reported on line 8I from the					
		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					
	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	24i			- 1	
j	Housing deduction from Form 2555	24j			- 1	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
	1041)	24k			- 1	
z	Other adjustments. List type and amount:					
0 5		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	. Ent	er here	and on		
	Form 1040, 1040-SR, or 1040-NR, line 10				26	
	BAA	REV	02/23/24 PR	0	Schedul	le 1 (Form 1040) 2023

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. **1**2

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

SREE BHARATH REDDY BURRI

Your social security number

798-74-4686

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)

See instructions for how to figure the amounts to enter on the lines below.		(d) Proceeds	(e) Cost	(g) Adjustment 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, F line 2, column	Part I,	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 Box A checked	351.	434.			-83.
2	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					
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			usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet 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	-83.		

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 lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)		(h) Gain or (loss) Subtract column (e) from column (d) and 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 Box D checked	1,157.	1,353.			-196.	
9	Totals for all transactions reported on Form(s) 8949 with Box E checked						
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.						
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		11				
12	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 Worksheet in the instructions	-	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a on the back	15	-196.				

Part	III Summary	· · · ·
16	Combine lines 7 and 15 and enter the result	16 –279.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 both gains?	
	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.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 (279.)
	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.	
	X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	
	BAA REV 02/23/24 PRO	Schedule D (Form 1040) 2023

Form **8949**

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.



Sequence No. 12A

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

Name(s) shown on return	Social security number of taxpayer identification number
SREE BHARATH REDDY BURRI	798-74-4686

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 transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below and see <i>Column</i> (e)	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)			(f) (g) Code(s) from instructions Amount of adjustment		from column (d) and combine the result with column (g).	
ROBINHOOD SECURITIES LLC	: 01/01/23	12/31/23	351.	434.			-83.	
2 Totals. Add the amounts in colum negative amounts). Enter each to Schedule D, line 1b (if Box A abov above is checked), or line 3 (if Box	tal here and inc /e is checked), li	lude on your ne 2 (if Box B	351.	434.			-83.	

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

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 SREE BHARATH REDDY BURRI

Social security number or taxpayer identification number 798-74-4686

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)

[] (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

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/23	12/31/23	1,157.	1,353.			-196.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	1,157.	1,353.			-196.		

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.

						I Income and Loss						OMB No. 1545-0074		
(Form	1040)	(From	rental real estat	te, royalties, partnersl	hips, S	corporat	ions, es	tates,	trusts, REMIC	s, etc.)	20	23		
Departm	ent of the Treasury					040-SR, 1040-NR, or 1041.					Attachment			
	Revenue Service		Go to www.	irs.gov/ScheduleE for	r instru	uctions an	nd the la	test in			Sequence	ce No. 13		
Name(s)) shown on return									Your soci	al security r	number		
	SREE BHARATH REDDY BURRI 798-74-46										4-4686			
Part	Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm													
	Note: If yo	ou are in me or lo	the business of r	enting personal proper 35 on page 2, line 40.	ty, use	Schedule	e C. See	instru	ctions. If you a	re an indiv	/idual, repo	ort farm		
Α					to file	Form(s)	10992.5	See ins	tructions			s X No		
	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions													
1a						,								
A	FLAT NO:4	03,SM2	ARUN SAROV	AR HYDERABAD I	ELAN	IGANA I	IN 50	3213						
В														
C								1						
1b	Type of Prope			tal real estate prope				Fa	ir Rental	Person		QJV		
-	(from list below	w)		t the number of fair is days. Check the Q			•		Days	Da	•			
	3			he requirements to f			A		365		0			
B C				t venture. See instru			B							
	of Property:						U							
	Single Family R	esidenc		ion/Short-Term Ren	tal	5 Land	4	7	Self-Rental					
	Multi-Family Re				lai	6 Roya	-			iha)				
	Marti-I army rie	Sidence		TIErcial		0 HOya	antes	0	Other (descri					
									Propertie	es:				
Incom							Α		В			C		
3					3		6	75.						
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9 10					9 10									
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12	-			(see instructions)	12		Z, 1	10.						
13					13									
14					14		2,6	90						
15	•				15		2,5							
16					16		, -							
17					17		2,2	30.						
18					18		2,4							
19	Other (list)		·		19									
20	Total expense	s. Add li	ines 5 through	19	20		15,4	96.						
21	Subtract line 2	0 from l	line 3 (rents) an	d/or 4 (royalties). If										
				ind out if you must										
	file Form 6198				21		-14,8	21.						
22				er limitation, if any,										
					22	(14,82		()	(
23a				3 for all rental prope				23a		675.				
b				4 for all royalty prop				23b						
C			•	12 for all properties				23c	~	45.0				
d				18 for all properties				23d		,456.				
e			-	20 for all properties		 do opulo		23e		,496.				
24 25				n on line 21. Do not				· ·	tal lossos hora		(1	1 0 0 1		
25 26				and rental real estate							(14,821.		
2n	LOTAL CENTAL M	ear esta	ue and rovait\	/ Income or (1099) (Comp		Z4 and	∠0 ⊢	mer me resu					

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26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .
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-14,821.