#### 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)

T.....

Taxpayer's name	Social security number
DIVYADUTT YENDLURI	882-61-5413
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Ente	r year you are authorizing.)
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.	
<b>1</b> Adjusted gross income	<b>1</b> 90,320.
<b>2</b> Total tax	<b>2</b> 12,132.
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>3</b> 20,434.
4 Amount you want refunded to you	· · · · <b>4</b> 8,302.
5 Amount you owe	

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

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

×	I authorize	GLOBAL TA	AXES		to enter or generate my PIN	E
				ERO firm name		

1	5	4	1	3	
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 mv 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.

Spouse's signature >	Da	te 🕨					 		
Practitioner PIN Method Returns Only—con	tinue	bel	ow						
Part III Certification and Authentication – Practitioner PIN Method O	nly								
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected Pl	N.	2	2	2		6 all zei	 9	8 9	Э

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 🕨	
	t Retain This Form — See s Form to the IRS Unless F		
For Denemicarly Deduction Act Nation and your toy red			Earm 8879 (Pay 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/05/24 PRO

<b>1040</b>	_	VR Department of the Treasury-Inter U.S. Nonresident AI		Return	2023	OMB N	lo. 154	5-0074	or stap	Only-Do not write ple in this space.
For the year Jan	. 1–	Dec. 31, 2023, or other tax year beginr	ning	, 2023, e	ending		, 2	0		ee separate
Your first name			Last name							ng number
								(see ins	structio	ns)
DIVYADUTT			YENDLURI					882	-61-5	5413
Home address (	num	ber and street). If you have a P.O. bo>	k, see instructions.							Apt. no.
		WASHINGTON DR								
	ost o	ffice. If you have a foreign address, al	so complete spaces be	elow.		Stat	е		ZIP cc	
MCKINNEY						TX			7507	/2
Foreign country	nar	le	Foreign province/sta	te/county		Fore	eign po	ostal co	de	
<b>Filim a</b>										
Filing Status		Single Married filing sep	arately (MFS)	Qualifying	g surviving spous	e (QSS	)	🗌 Es	tate	Trust
Check only	H	you checked the QSS box, enter the	child's name if the qua	lifying perso	on is a child but n	ot your	deper	ndent:		
one box.										
<b>Digital Assets</b>	At	any time during 2023, did you: (a) rece	ive (as a reward, award	d, or payme	nt for property or	service	es); or	(b) sell,	exchar	nge, or
		erwise dispose of a digital asset (or a								
Dependents						(	4) Cheo	ck the bo	x if quali	fies for (see inst.):
(see instructions):		(1) First name Last name	(2) Depen identifying		(3) Relationship to	VOU	Child	tax crec	lit C	Credit for other dependents
					(0) Holdhorlonip to	,		$\Box$		
If more than four								$\overline{\square}$		
dependents, see instructions and										
check here										
Income	1a	Total amount from Form(s) W-2, box	x 1 (see instructions)					1a		103,830.
Effectively	b	Household employee wages not rep	oorted on Form(s) W-2					1b		
Connected	С	Tip income not reported on line 1a (	see instructions) .					10		
With U.S.	d	Medicaid waiver payments not repo						1d		
Trade or	е	Taxable dependent care benefits fro				• •	• •	1e		
Business	f	Employer-provided adoption benefit				• •	• •	1f	-	
Attach	g L	Wages from Form 8919, line 6					• •	1g		
Form(s) W-2,	h i	Other earned income (see instructio Reserved for future use						1h		
1042-S, SSA-1042-S,		Reserved for future use						1j		
RRB-1042-S,	, k	Total income exempt by a treaty from			1 1	• •	• •	.,		
and 8288-A here, Also	Ň	line 1(e)	•	<i>,</i> .						
attach	z	Add lines 1a through 1h						1z		103,830.
Form(s) 1099-R if	2a	Tax-exempt interest 2	a	<b>b</b> Taxa	able interest			2b		
tax was	3a	Qualified dividends 3	a	<b>b</b> Ordii	nary dividends .			3b		
withheld.	4a	IRA distributions 4		-	able amount			4b		
If you did not get a Form	5a	Pensions and annuities 5			able amount			5b		
W-2, see	6	Reserved for future use						1 <b>6</b>		4 110
instructions.	7 8	Capital gain or (loss). Attach Schedu Additional income from Schedule 1		•	-					4,117.
	о 9	Additional income from Schedule 1 Add lines 1z, 2b, 3b, 4b, 5b, 7, and								<u>-17,627.</u> 90,320.
	10	Adjustments to income from Sched								
	10				•	-		10		
	11	Subtract line 10 from line 9. This is								90,320.
	12	Itemized deductions (from Schedu								
		deduction (see instructions)								13,850.
	13a	Qualified business income deductio								
	b	Exemptions for estates and trusts o	nly (see instructions)		. <b>13b</b>					
	С	Add lines 13a and 13b						130		
	14		· · · · · ·							13,850.
	15 D.:	Subtract line 14 from line 11. If zero						15		76,470.

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

2023)								Page <b>2</b>
16	Tax (see instructions). Check if an	y from For	m(s): <b>1</b> 🗌 88	314 <b>2</b> 497	2 <b>3</b>		16	12,132.
17							. 17	0.
18	Add lines 16 and 17						. 18	12,132.
19	Child tax credit or credit for othe	r depende	nts from Sched	ule 8812 (Form 10	40)		. 19	
20	Amount from Schedule 3 (Form 1	1040), line	8				. 20	
21	Add lines 19 and 20						. 21	
22	Subtract line 21 from line 18. If z	ero or less	s, enter -0				. 22	12,132.
23a	Tax on income not effectively cor	nnected w	ith a U.S. trade o	or business from				
	Schedule NEC (Form 1040-NR), I	ine 15 .			23a		_	
b		•		. ,				
					23b		_	
С		,						
d								
24			<b>(</b>				. 24	12,132.
25								
а						0,43	4.	
b	Form(s) 1099						_	
С	· · · · · · · · · · · · · · · · · · ·				25c			
d	Add lines 25a through 25c						. <b>25d</b>	20,434.
е								
f							. <b>25f</b>	
g							. <b>25g</b>	
26							. 26	
27	Reserved for future use				27			
28	Additional child tax credit from S	chedule 8	812 (Form 1040	)	28		_	
29	•						_	
30	Reserved for future use							
31	•							
32								
								20,434.
						_		8,302.
								8,302.
b	•				Checking	Saving	js 🔤	
d								
е		ailed to ar	n address outsid	le the United State	es not shown on	page	1,	
					1			
36	· · · · · · · · · · · · · · · · · · ·				36			
37			-					
		-	-		· · · · ·	• •	. 37	
Do yo	u want to allow another person to	discuss ti		ie IRS? See instru				ow. 🛛 No
•	nee's							
							,	former land a land
								ent you an Identity
Tours	signature		Dale					PIN, enter it here
				SOFTWARE D	EVELOPER			
Phone	e no.		Email address					
Prepa	rer's name	Preparer'	s signature		Date	PTIN		Check if:
VENKA	TA SAI PAVAN KUMAR DUDIPALLI	VENKATA	SAI PAVAN KU	JMAR DUDIPALLI		P024	470833	Self-employed
						Phon	eno. (6'	70\065 0500
Firm's	name GLOBAL TAXES I	JTC					eno. (n	78)965-9522
	17 18 19 20 21 22 23a b c d 24 25 a b c d e f g 26 27 28 29 30 31 32 33 34 35a b d e f g 26 27 28 29 30 31 32 33 34 35a b d e f g 26 27 28 29 30 31 32 33 34 35a b c 27 28 29 30 31 32 33 34 35a b c 27 28 29 30 31 32 33 34 35a b c 27 28 29 30 31 32 33 34 35a b c 27 28 29 30 31 32 33 34 35a b c 19 26 27 28 29 30 31 32 33 34 35a b c c 10 26 27 28 29 30 31 32 33 34 35a b c 19 30 31 32 33 34 35a b c 10 37 38 Do yoo Design name Phone Prepa	<ul> <li>Amount from Schedule 2 (Form 1</li> <li>Add lines 16 and 17</li> <li>Child tax credit or credit for othe</li> <li>Amount from Schedule 3 (Form 1</li> <li>Add lines 19 and 20</li> <li>Subtract line 21 from line 18. If zz</li> <li>Tax on income not effectively cord Schedule NEC (Form 1040-NR), I</li> <li>Other taxes, including self-emploine 21</li></ul>	17       Amount from Schedule 2 (Form 1040), line         18       Add lines 16 and 17       .         19       Child tax credit or credit for other depended         20       Amount from Schedule 3 (Form 1040), line         21       Add lines 19 and 20       .         22       Subtract line 21 from line 18. If zero or less         23a       Tax on income not effectively connected w Schedule NEC (Form 1040-NR), line 15         b       Other taxes, including self-employment tax line 21         10       Add lines 23a through 23c       .         c       Transportation tax (see instructions)       .         d       Add lines 22 and 23d. This is your total tax         25       Federal income tax withheld from:         a       Form(s) 1099       .         c       Other forms (see instructions)       .         d       Add lines 25a through 25c       .       .         f       Form(s) 8288-A       .       .       .         g       Form(s) 1042-S       .       .       .         26       2023 estimated tax payments and amount       .       .       .         27       Reserved for future use       .       .       .       .         28       Addition	17       Amount from Schedule 2 (Form 1040), line 3	17       Amount from Schedule 2 (Form 1040), line 3	17       Amount from Schedule 2 (Form 1040), line 3	17       Amount from Schedule 2 (Form 1040), line 3	17       Anount from Schedule 2 (Form 1040), line 3

SCHEDULE	1
(Form 1040)	

Department of the Treasury

## Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 3

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. <b>01</b>
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
DIVYADUTT YEND	LURI	882-61	-5413

Par	t 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		
4	Other gains or (losses). Attach Form 4797	. 4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	. 5	-17,627.
6	Farm income or (loss). Attach Schedule F	. 6	
7	Unemployment compensation	. 7	
8	Other income:		
а	Net operating loss	)	
b	Gambling		
С	Cancellation of debt		
d	Foreign earned income exclusion from Form 2555       .       .       8d	)	
е	Income from Form 8853		
f	Income from Form 8889		
g	Alaska Permanent Fund dividends		
h	Jury duty pay		
i	Prizes and awards		
j	Activity not engaged in for profit income		
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		
	instructions)	_	
	Section 951(a) inclusion (see instructions)		
0	Section 951A(a) inclusion (see instructions)		
p	Section 461(I) excess business loss adjustment       8p         Taxable distributions from an ABLE account (see instructions)       8g		
q	Scholarship and fellowship grants not reported on Form W-2 8r	_	
r	Nontaxable amount of Medicaid waiver payments included on Form		
S	1040, line 1a or 1d		
+	Pension or annuity from a nonqualifed deferred compensation plan or		
Ľ	a nongovernmental section 457 plan		
u	Wages earned while incarcerated	_	
z	Other income. List type and amount:		
2			
9	Total other income. Add lines 8a through 8z	. 9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter here and on For		
	1040, 1040-SR, or 1040-NR, line 8		-17,627.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		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			
	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			19a	
b	Recipient's SSN			
c	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:		20	
2 a	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the			
D	rental of personal property engaged in for profit			
-	Nontaxable amount of the value of Olympic and Paralympic medals		-	
С	and USOC prize money reported on line 8m			
h			-	
d			-	
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974		-	
f	Contributions to section 501(c)(18)(D) pension plans		-	
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)		-	
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			
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 REV	02/05/24 PRO	Schedule 1 (F	orm 1040) 202

### SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

## Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

23

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information.

Internal Revenue Service Name shown on Form 1040-NR Attachment Sequence No. 7B Your identifying number

2

DIVYADUTT YENDLURI

882-61-5413

Enter **amount of income** under the appropriate rate of tax. See instructions.

		Nature of Income			<b>(a)</b> 10%	<b>(b)</b> 15%	(c) 30%	(d) Other	(specify)
					(a) 10%	<b>(b)</b> 15%	(C) 30 %	%	%
1	Dividends and divide	nd equivalents:							
а	Dividends paid by U.	S. corporations		1a					
b	Dividends paid by fo	reign corporations		1b					
с	Dividend equivalent p	ayments received with respect to section 871(m) tra	ansactions	1c					
2	Interest:								
а	Mortgage			2a					
b	Paid by foreign corpo	prations		2b					
С	Other			2c					
3	Industrial royalties (p	atents, trademarks, etc.)		3					
4	Motion picture or TV	copyright royalties		4					
5	Other royalties (copy	rights, recording, publishing, etc.)		5					
6	Real property income	e and natural resources royalties		6					
7	Pensions and annuiti	es		7					
8	Social security benef	its		8					
9		e 18 below		9					
10	Gambling-Resident	s of Canada only. Enter net income in column (c). r <b>-0</b>							
а	Winnings								
b			[	10c					
11	Note: Enter winnings	s of countries other than Canada.		11					
12	Other (specify):								
				12					
13	Add lines 1a through	12 in columns (a) through (d)		13					
14		ate of tax at top of each column		14					
15	Tax on income not ef	fectively connected with a U.S. trade or business	s. Add columns	s (a) t	hrough (d) of line 14	. Enter the total here	and on Form 1040	NR, line 23a <b>15</b>	
		Capital Gains and	Losses Fr	om	Sales or Excha	nges of Propert	У		
losses f exchan within t	nly the capital gains and from property sales or ges that are from sources the United States and not	16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	<b>(b)</b> Date acquir mm/dd/yyyy		(c) Date sold mm/dd/yyyy	(d) Sales price	<b>(e)</b> Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
effectively connected with a U.S. business. Do not include a gain									
or loss	on disposing of a U.S. real ty interest; report these								
gains a	nd losses on Schedule D								
(Form 1 Demost	•								
exchan	property sales or ges that are effectively								
	ted with a U.S. business edule D (Form 1040),	17 Add columns (f) and (g) of line 16					17		
	1797, or both.	18 Capital gain. Combine columns (f) and (g	g) of line 17.	Ente	r the net gain here	e and on line 9 abo	ove. If a loss, ente	r-0 <b>18</b>	

### SCHEDULE OI (Form 1040-NR)

## **Other Information**

Attach to Form 1040-NR.

OMB No. 1545-0074 2023

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form1040NI Answ				R for instructions and wer all questions.	•	Attachment Sequence No. 7C		
Name sh	own on Form 1040	-NR				Your identify		
DIVY	ADUTT YEND	LURI				882-61-	-5413	
Α	Of what country	y or countries v	vere you a citizen or nation	al during the tax year?	'INDIA			
В	In what country	/ did you claim	residence for tax purpose	s during the tax year?	United States			
	•		green card holder (lawful p	ermanent resident) of	the United States? .		. 🗌 Yes	🗙 No
	Were you ever:							
	A U.S. citizen?							🛛 No 🖾 No
			rmanent resident) of the Ur ), see Pub. 519, chapter 4,				. Yes	
Е	If you had a vis	sa on the last o	day of the tax year, enter y day of the tax year. $F1$	your visa type. If you	didn't have a visa, en			
F	Have you ever	changed your v	isa type (nonimmigrant sta e the date and nature of th	tus) or U.S. immigratio	on status?		. 🗌 Yes	🗙 No
G	List all dates vo	u entered and	left the United States durin	a 2023. See instructio	ons.			
	-		anada or Mexico AND cor	-		ent intervals	S,	
	check the box	for Canada or	Mexico and skip to item I	4	🗌 Canada	Mexic	0	
	Date entered		Date departed United Stat	es Da	ate entered United State	s Date d	eparted Unite	d States
	mm/c	dd/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy	
н	Give number of	davs (including	vacation, nonworkdays, and	Land the second s	present in the United	States during		
••			, 2022,				9.	
I	Did you file a U	.S. income tax	return for any prior year? . nd form number you filed:					🗌 No
J			st?					🗙 No
			J.S. or foreign owner unde					
			ribution from a U.S. person				_	🗌 No
			ation of \$250,000 or more					🛛 No
			ative method to determine					□ No
L			you are claiming exempt See Pub. 901 for more in			tax treaty v	with a foreign	country,
-	,	• • • •	the applicable tax treaty art			claimod the	troaty bonofi	t and the
••			e columns below. Attach Fo				liealy benefi	t, and the
		(a) Cou			(c) Number of month	ns (d)	Amount of exe	empt
			·		claimed in prior tax ye		ne in current ta	
	(e) Total Enter	r this amount o	n Form 1040-NR, line 1k. D	l In not enter it anvwhe	re else on line 1			
2.			preign country on any of the				. Yes	No
			s pursuant to a Competen				Yes	⊠ No
			Competent Authority deterr					
м	Check the appl	icable box if:						

1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected 

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions . . . . . . . . . . . .

BAA

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 02/05/24 PRO Schedule OI (Form 1040-NR) 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.

2023 Attachment Sequence No. 12

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

DIVYADUTT YENDLURI

Your social security number

882-61-5413

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)

	instructions for how to figure the amounts to enter on the below.	<b>(d)</b> Proceeds	(e) Cost	<b>(g)</b> 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, Part I, line 2, column (g)		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	9,154.	5,052.			4,102.
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			usts from	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	4,102.

### 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.		<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 form may be easier to complete if you round off cents to whole dollars.		(sales price)	(or other basis)	Form(s) 8949, Part II, line 2, column (g)		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	214.	199.			15.
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	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	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	15.

Part	III Summary	1 1
16	Combine lines 7 and 15 and enter the result	16 4,117.
	• 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?          X       Yes. Go to line 18.	
	<b>No.</b> 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:	
	The loss on line 16; or     (\$3,000), or if married filing separately, (\$1,500)	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.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

BAA REV 02/05/24 PRO

Schedule D (Form 1040) 2023

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.



Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form8949 for instructions and the latest information.

Social security number or taxpayer identification number

882-61-5413

Name(s) shown on return	
DIVYADUTT YENDLURI	

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

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis See the <b>Note</b> below	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	<b>(h)</b> 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	c 01/01/23	12/31/23	9,154.	5,052.			4,102.
2 Totals. Add the amounts in columnegative amounts). Enter each to Schedule D, line 1b (if Box A aborabove is checked), or line 3 (if Box	otal here and inc ve is checked), <b>li</b>	lude on your ne 2 (if Box B	9,154.	5,052.			4,102.

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

	Page <b>2</b>
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Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side DIVYADUTT YENDLURI

Social security number or taxpayer identification number 882-61-5413

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

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or disposed of	<b>(d)</b> Proceeds (sales price)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e)	below See the separate instructions.		<b>(h)</b> Gain or (loss) Subtract column (e) from column (d) and
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/23	214.	199.			15.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	I here and inc is checked), <b>lir</b>	lude on your 1e 9 (if Box E	214.	199.			15.

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.

REV 02/05/24 PRO

SCHEDULE	Е
(Form 1040)	

OMB No. 1545-0074

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

Department of the Treasury

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

2023
Attachment Sequence No. 13

....

Internal	Revenue Service	Go to www.irs.gov/ScheduleE for	r instru	ictions ai	na the la	itest in	ormation.		· ·	e No. <b>13</b>
Name(s	) shown on return							Your soci	al security r	umber
DIVY	ADUTT YENDLU	RI						882-6	1-5413	
Part	Note: If you a	Loss From Rental Real Estate an are in the business of renting personal proper or loss from Form 4835 on page 2, line 40.			e C. See	instruc	tions. If you	are an indi	vidual, repo	ort farm
		payments in 2023 that would require you will you file required Form(s) 1099?								
1a		s of each property (street, city, state, ZII								
Α	-	GGAYYAPETA ANDHRA PRADESH I		,						
B				11 10 /						
c										
1b	Type of Property (from list below)	2 For each rental real estate prope above, report the number of fair					r Rental Days		nal Use ays	QJV
Α	3	personal use days. Check the Q	JV bo>	c only	Α		365		0	$\Box$
В		if you meet the requirements to f			В					$\overline{\Box}$
С		qualified joint venture. See instru	lctions	6.	С					
Туре	of Property:							1	I	
	Single Family Resi Multi-Family Resid		ital	5 Lano 6 Roy			Self-Rental Other (desc	ribe)		
							Propert	ies:		
Incom	ne:				Α		В			С
3	Rents received		3		4	20.				
4	Royalties receive	d	4							
Exper	ises:									
5	Advertising		5							
6	Auto and travel (s	see instructions)	6							
7		intenance	7		1,1	20.				
8	Commissions .		8							
9	Insurance		9							
10	Legal and other p	professional fees	10							
11	Management fee	S	11		1,0	40.				
12	Mortgage interes	t paid to banks, etc. (see instructions)	12							
13	Other interest		13							
14			14		5,6					
15	Supplies		15		5,7	89.				
16	Taxes		16							
17			17		4,4	00.				
18		ense or depletion	18							
19	Other (list)	Add lines 5 through 19	19							
20			20		18,0	47.				
21	result is a (loss),	rom line 3 (rents) and/or 4 (royalties). If see instructions to find out if you must	21		-17,6	27.				
22		real estate loss after limitation, if any, ee instructions)	22	( -	-17,62	27.)(		)	(	)
23a	Total of all amour	nts reported on line 3 for all rental prope				23a		420.		,
b	Total of all amour	nts reported on line 4 for all royalty prop	oerties			23b				
с	Total of all amour	nts reported on line 12 for all properties				23c				
d	Total of all amour	nts reported on line 18 for all properties				23d				
е		nts reported on line 20 for all properties				23e	18	8,047.		
24	Income. Add pos	sitive amounts shown on line 21. <b>Do not</b>	t inclu	de any lo	osses			. 24		
25	Losses. Add royal	ty losses from line 21 and rental real estate	e losse	es from lin	ne 22. Ei	nter tot	al losses he	re <b>25</b>	( 1	7,627.)
26		estate and royalty income or (loss). II, and IV, and line 40 on page 2 do no								

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

-17,627.

26

Form <b>8582</b>
Department of the Treasury Internal Revenue Service

Name(s) shown on return

DIVYADUTT YENDLURI

# **Passive Activity Loss Limitations**

See separate instructions.

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

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

Identifying number 882-61-5413

Par							
	Caution: Complete Parts IV ar	nd V before comple	eting Part I.				
	Real Estate Activities With Active P Ince for Rental Real Estate Activities			ive participation,	see <b>Special</b>		
	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the Combine lines 1a, 1b, and 1c	unt from Part IV, co ne amount from Pa	olumn (b))	1b ( 1c (	0. 17,627.) )	1d	-17,627.
All Oth	ner Passive Activities						
2a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the Combine lines 2a, 2b, and 2c	unt from Part V, co ne amount from Pa	lumn (b)) rt V, column (c))	<b>2c</b> (	)	2d	
3 Cautic	Combine lines 1d and 2d and subtra zero or more, stop here and include prior year unallowed losses entered normally used If line 3 is a loss and: • Line 1d is a • Line 2d is a on: If your filing status is married filing	this form with you on line 1c or 2c. F loss, go to Part II. loss (and line 1d is	r return; all losse leport the losses  zero or more), ski	es are allowed, i on the forms ar · · · · · · · · · ip Part II and go	ncluding any id schedules  to line 10.	3 year,	-17,627. <b>do not</b> complete
	Instead, go to line 10.		,			<b>,</b> ,	
Par					-		
	Note: Enter all numbers in Par			tions for an exan	nple.		
4 5 6 7	Enter the <b>smaller</b> of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income <b>Note:</b> If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5	4	17,627.				
8							
9	Enter the smaller of line 4 or line 8. If					9	<u>21,027.</u> 17,627.
Part							
<ul> <li>Add the income, if any, on lines 1a and 2a and enter the total</li></ul>							0
Part			a, 1b, and 1c. S	ee instructions		I	
Name of activity		Current year		Prior years	Ove	Overall gain or loss	
		(a) Net income (b) Net loss (line 1a) (line 1b)		(c) Unallowed loss (line 1c)	(d) Gair	ı	<b>(e)</b> Loss
MUKI	YALA	0.	17,627.				17,627.
	Enter on Part I, lines 1a, 1b, and 1c	0.	17,627.				
For Pa	perwork Reduction Act Notice, see instru	uctions.		REV 02	2/05/24 PRO		Form <b>8582</b> (2023)

Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

			Curren	t year		Prior years		Overall gain or loss			
Name of activity		(a) Net i	(a) Net income (line 2a)		(b) Net loss (line 2b)		lowed le 2c)	(d) Gain		(e) Loss	
		(iiiie	20)	(iii	16 2.0)	1033 (111	16 20)				
									_		
<b>Fotal</b> , Enter	on Part I, lines 2a, 2b, and	20									
Part VI	Use This Part if an A		wn on P	art II,	Line 9. S	ee instruc	ctions.				
		Form or s		,							
	Name of activity	and line to be rep	and line number to be reported on (see instructions)		<b>(a)</b> Loss		atio	<b>(c)</b> Special allowance		(d) Subtract column (c) from column (a).	
MUKTYALA		E Ln	E Ln 22		17,627.		00000	17,627.		0.	
Total		I			17,627.		0	17,627.		0.	
Part VII	Allocation of Unallow	ed Losses.	 See instru			1.0	0	17,02	1.	0.	
			m or sche								
	Name of activity		and line number to be reported on (see instructions)		<b>(a)</b> L	Loss (		(b) Ratio (d		<b>c)</b> Unallowed loss	
Total								1.00			
Part VIII	Allowed Losses. See	instructions.									
	Name of activity		Form or schedule and line number to be reported on (see instructions)		<b>(a)</b> Loss		(b) Unallowed loss		(c	(c) Allowed loss	
							1				

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Form **8582** (2023)