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	ission Identification Number (SID)		•				
Taxpaye	er's name	Social security	y number				
JAY.	ACHANDRA VARAPRASAD REDDY TAKKALA	840-09-	840-09-2008				
Spouse	's name	Spouse's soci	al security nu	ımber			
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you ar	e authoriz	zing.)			
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	103,157.			
2	Total tax		2	14,959.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	18,322.			
4	Amount you want refunded to you		4	3,363.			
5	Amount you owe		5				
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a copy	of your i	return)			
return to send for any Agent payme authori payme busines taxes to person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected easy in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution zation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate nt, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requires days prior to the payment (settlement) date. I also authorize the financial institutions involved in the correceive confidential information necessary to answer inquiries and resolve issues related to the particle of the payment (PIN) below is my signature for the income tax return (original or amended) I and incircular forms that the consent.	tter, or electro ction of the tra S. Treasury ar cated in the ta an to debit the the authoriza eests must be processing of ayment. I furth	nic return or ansmission, and its design x preparatio entry to this tion. To reverse received not the electronner acknowl	(b) the reason ated Financial in software for account. This oke (cancel) a b later than 2 ic payment of edge that the			
Taxpa	yer's PIN: check one box only						
×	I authorize GLOBAL TAXES LLC to enter or generate r ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ente	2 0 0 er five digits, 't enter all ze				
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.	od. The ERO	must com				
Yours	signature ► Date ►	03-19-202	24				
Spous	se's PIN: check one box only						
	I authorize 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 if you are entering your own PIN and your return is filed using the Practitioner PIN method below.	Ento don ow authorizin		ros his box only			
Spous	Date ►						
	Practitioner PIN Method Returns Only—continue below						
Part	Certification and Authentication — Practitioner PIN Method Only						
ERO's	S EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 6 Don't ente		2 7 1			
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income tal zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	itting this retu	rn in accord	ance with the			
ERO's	s signature ► Date ►						
	ERO Must Retain This Form — See Instructions						

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

Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Jan. 1-Dec. 31, 2023, or other tax year beginn				ning, 2023, ending, 20					See separate instructions.		
Your first name	and i	middle initial	Last name					Your identifying number			
									(see instructions)		
JAYACHANI	DRA	VARAPRASAD REDDY	TAKK	ALA				840-0	9-2008		
Home address	(numl	ber and street). If you have a P.O. box	, see ins	tructions.					Apt. no.		
8618 VALI	ΈY	RANCH PARKWAY W							3075		
City, town, or pe	ost o	ffice. If you have a foreign address, als	so comp	lete spaces below.			State	Z	IP code		
IRVING							TX	7	5063		
Foreign country	nam	e	Foreig	n province/state/county			Foreign p	ostal code	!		
Filing		Single Married filing sepa	arataly (N	AES) Duglifyii	na cunii	ving spouse (266)	☐ Estat	te 🗌 Trust		
Status	1	ndent:	le 🗀 must								
Check only	"	ilueili.									
one box.											
Digital Assets		ny time during 2023, did you: (a) recei									
	 	erwise dispose of a digital asset (or a f	inanciai	Interest in a digital asse	(See	instructions.)					
Dependents				(2) Dependent's					qualifies for (see inst.): Credit for other		
(see instructions):		(1) First name Last name	1			(3) Relationship to you		d tax credit	dependents		
If more than four dependents, see											
instructions and											
check here											
Income	1a	Total amount from Form(s) W-2, box	< 1 (see i	nstructions)				. 1a	114,249.		
Effectively	b	Household employee wages not rep	orted or	Form(s) W-2				. 1b			
Connected	С	Tip income not reported on line 1a (s Medicaid waiver payments not repo		•				. 1c			
With U.S.	d	. 1d									
Trade or	е	Taxable dependent care benefits fro	1e								
Business											
Attach	g	Wages from Form 8919, line 6	1g								
Form(s) W-2,	h :	Other earned income (see instruction	. 1h								
1042-S, SSA-1042-S,	i :	Reserved for future use	4:								
RRB-1042-S,	J	Reserved for future use	. 1j								
and 8288-A	k	Total income exempt by a treaty from line 1(e)									
here. Also attach	z	Add lines 1a through 1h				1k		. 1z	114,249.		
Form(s)	2a	Tax-exempt interest 2a	1	1	· · · · · · · · · · · · · · · · · · ·	erest		2b			
1099-R if tax was	3a	Qualified dividends 3a	_			vidends		3b			
withheld.	4a	IRA distributions 4a			•	nount					
If you did not	5a	Pensions and annuities 5a	_			nount					
get a Form	6	Reserved for future use	· .					6			
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu					_		0.		
	8	Additional income from Schedule 1	(Form 10	040), line 10				. 8	-11,092.		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	8. This is	your total effectively o	onnect	ed income .		. 9	103,157.		
	10	Adjustments to income from Sched income	,	,,	,	-					
	11	Subtract line 10 from line 9. This is y							103,157.		
	12	Itemized deductions (from Schedu	ıle A (Fo	rm 1040-NR)) or, for ce	rtain res	idents of India	a, standa	rd			
	10-	deduction (see instructions)				.a pean 05/11 13a	naia ite	12 12	13,850.		
	13a h	Qualified business income deduction				13a 13b					
	b c	Exemptions for estates and trusts of Add lines 13a and 13b	• .	•				13c			
	14								13,850.		
	15	Subtract line 1/1 from line 11. If zero						15	89 307		

Form 1040-NR (2	2023)								Page 2
Tax and	16	Tax (see instructions). Check if an	v from Fo	rm(s): 1 88	314 2 497	2 3 \square		16	14,959.
Credits	17	Amount from Schedule 2 (Form	•					17	0.
Oround	18	Add lines 16 and 17	18	14,959.					
	19	Child tax credit or credit for other						19	,
	20	Amount from Schedule 3 (Form	•		·	•		20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If z						22	14,959.
	23a	Tax on income not effectively co Schedule NEC (Form 1040-NR),	nnected w	rith a U.S. trade	or business from	23a			11/000.
	L					200		1	
	b	Other taxes, including self-empline 21	-			23b			
	•	Transportation tax (see instruction				23c		1	
	C C	•	,					224	
	d	Add lines 23a through 23c						23d	14 050
D	24	Add lines 22 and 23d. This is you		x	<u> </u>	· · · · ·		24	14,959.
Payments	25	Federal income tax withheld from				1.05			
	a	Form(s) W-2					3,322.	-	
	b	Form(s) 1099				25b		-	
	C	Other forms (see instructions) .				25c			10 200
	d	Add lines 25a through 25c						25d	18,322.
	е	Form(s) 8805						25e	
	f	Form(s) 8288-A						25f	
	g	Form(s) 1042-S	25g						
	26	2023 estimated tax payments ar						26	
	27	Reserved for future use				27		4	
	28	Additional child tax credit from S	Schedule 8	3812 (Form 1040)	28			
	29	Credit for amount paid with Forn							
	30	Reserved for future use							
	31	Amount from Schedule 3 (Form							
	32	Add lines 28, 29, and 31. These	are your t o	otal other paym	ents and refunda	ble credits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26,	and 32. T	hese are your to	otal payments .			33	18,322.
Refund	34	If line 33 is more than line 24, su	btract line	24 from line 33.	This is the amoun	t you overpaid		34	3,363.
	35a	Amount of line 34 you want refu	nded to y	ou . If Form 8888	is attached, chec	k here		35a	3,363.
Direct deposit?	b	Routing number 1 0 1 1	. 0 0	0 4 5	c Type: 🛛	Checking	Savings		
See instructions.	d	Account number 5 1 8 (1 0	5 2 1 0	4 5				
	е	If you want your refund check m				es not shown on	page 1,		
		enter it here.							
	36	Amount of line 34 you want app	lied to you	ur 2024 estimat	ed tax	36			
Amount	37	Subtract line 33 from line 24. Thi	is is the ar	nount you owe					
You Owe		For details on how to pay, go to	www.irs.g	ov/Payments or	see instructions .			37	
	38	Estimated tax penalty (see instru	ictions) .			38			
Third	Do yo	ou want to allow another person to	discuss t	his return with th	ne IRS? See instru	ctions.	es. Comp	lete bel	ow. 🗵 No
Party	Desig	inee's		Phone		Persor	nal identif	ication	
Designee	name			no			er (PIN)		
		penalties of perjury, I declare that I have	ve examine	d this return and a					
Ciar	belief,	they are true, correct, and complete. D	eclaration (ot preparer (other t	nan taxpayer) is base	ed on all informatio			
Sign	Your	signature		Date	Your occupation				ent you an Identity
Here		Prote							PIN, enter it here
-	Di			E	SOFTWARE E	NGTNEEK	(see	inst.)	
	Phon		Dronoss	Email address		Data	DTINI		Chaols if:
Paid	•	arer's name		's signature	a.a.b. ~	Date	PTIN		Check if:
Preparer	SYAN	SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 03/20/2024 P02082							Self-employed

GLOBAL TAXES LLC

Firm's name

Use Only

Phone no. (678)965-9522

Firm's EIN

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

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

JAYACHANDRA VARAPRASAD REDDY TAKKALA

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 840-09-2008

Par	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	-11,092.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81	4	
m	Olympic and Paralympic medals and USOC prize money (see	_		
	instructions)	8m	4	
n	Section 951(a) inclusion (see instructions)	8n	4	
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	0- /	\	
	1040, line 1a or 1d	8s (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or	0+		
	a nongovernmental section 457 plan	8t 8u		
u -		ou	+	
Z	Other income. List type and amount:	8z		
9	Total other income. Add lines 8a through 8z		9	
9 10	Combine lines 1 through 7 and 9. This is your additional income . Ente		9	
10	1040, 1040-SR, or 1040-NR, line 8		10	-11,092.
	1010, 1010 011, 01 1070 1111, 11110 0		10	,

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

Par	t II Adjustments to Income				
11	Educator expenses			. 11	
12	Certain business expenses of reservists, performing artists, and fee-				
	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				
16	Self-employed SEP, SIMPLE, and qualified plans				
17	Self-employed health insurance deduction				
18	Penalty on early withdrawal of savings				
19a	Alimony paid				
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				Į.
20	IRA deduction				
21	Student loan interest deduction				
22	Reserved for future use				
23	Archer MSA deduction			. 23	
24	Other adjustments:				
а	,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	· · · · · · · · · · · · · · · · · · ·	24c			
d	the state of the s	24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		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				
	-	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:				
		24z			Į.
25	Total other adjustments. Add lines 24a through 24z				
26	Add lines 11 through 23 and 25. These are your adjustments to income . Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	r here and	on 26	
	1 OITH 1070, 1070-011, 01 1070-1111, 11110-10	• •		. 20	

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Attachment Sequence No. 7B

Your identifying number

JAYACHANDRA VARAPRASAD REDDY TAKKALA 840-09-2008 Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) **Nature of Income** (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 4 5 Real property income and natural resources royalties 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and (f) LOSS 16 (a) Kind of property and description (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources subtract (d) from (e). descriptive details not shown below) subtract (e) from (d). within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-18 Form 4797, or both.

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Department of the Treasury Internal Revenue Service

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

n.	2023 Attachment Sequence No. 7C
Your identif	ying number

OMB No. 1545-0074

Name sl	nown on Form 1040-NR				Your identifying nur	nber					
JAYA	ACHANDRA VARAPRASAD I	REDDY TAKKALA			840-09-2008	3					
Α	Of what country or countries w	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	ear? United States	;						
С	Have you ever applied to be a	green card holder (lawful p	ermanent reside	nt) of the United States? .		Yes 🗵 No					
D	Were you ever:			,							
1.	A U.S. citizen?				🗆	Yes 🗵 No					
	A green card holder (lawful per					Yes 🗵 No					
	If you answer "Yes" to (1) or (2										
E	If you had a visa on the last of immigration status on the last of	day of the tax year, enter	your visa type. If		•						
F	Have you ever changed your v If you answered "Yes," indicate		tus) or U.S. immi	gration status?		Yes 🗵 No					
G	List all dates you entered and										
	Note: If you're a resident of C		-		uent intervals,						
	check the box for Canada or	Mexico and skip to item H	1	🗌 Canada	☐ Mexico						
	Date entered United States	Date departed United Stat	es	Date entered United State	es Date departed	d United States					
	mm/dd/yy	mm/dd/yy		mm/dd/yy		dd/yy					
Н	Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during:										
	2021, 2022, and 2023, a65										
I	Did you file a U.S. income tax return for any prior year?										
	If "Yes," give the latest year ar	nd form number you filed:		1040NR							
J	Are you filing a return for a trus					Yes 🗵 No					
	If "Yes," did the trust have a l					¬					
.,	U.S. person, or receive a contr					Yes No					
K	Did you receive total compens		-			Yes ⊠ No					
	If "Yes," did you use an alterna			•		Yes No					
L	Income Exempt From Tax—If complete (1) through (3) below	. See Pub. 901 for more in	formation on tax	treaties.							
1.	Enter the name of the country,				claimed the treaty	benefit, and the					
	amount of exempt income in th										
	(a) Cou	ntry	(b) Tax treaty ar			t of exempt					
				claimed in prior tax ye	ears income in cu	ırrent tax year					
	(e) Total. Enter this amount or	n Form 1040-NR line 1k Γ	lo not enter it an	where else on line 1							
2.	Were you subject to tax in a fo					Yes No					
	Are you claiming treaty benefit			• •		Yes ⊠ No					
	If "Yes," attach a copy of the C		-		· · _						
М	Check the applicable box if:	paramata and a second		,							
	This is the first year you are may with a U.S. trade or business u										
0		, ,				_					
<u>2.</u>	You have made an election in States as effectively connected										

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

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**

Your social security number

JA	YACHANDRA VARAPRASAD REDDY TAKKALA			840-	-09-	2008			
-	ou dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona	•	•	_					
Pa	tI Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)			
lines	Gee instructions for how to figure the amounts to enter on the nes below. (d) Proceeds (Sales price) (e) Adjustments to gain or loss from form may be easier to complete if you round off cents to								
	e dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colum		combine the result with column (g)			
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for								
	which you have no adjustments (see instructions).								
	However, if you choose to report all these transactions								
41.	on Form 8949, leave this line blank and go to line 1b .								
10	Totals for all transactions reported on Form(s) 8949 with Box A checked	10.	10.			0.			
2	Totals for all transactions reported on Form(s) 8949 with	10:	10.			0.			
	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 (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	6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions								
7									
Par					7 (see i	instructions)			
See i	nstructions for how to figure the amounts to enter on the	(4)	(0)	(g)	.	(h) Gain or (loss)			
This	below. form may be easier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	Adjustmen to gain or loss Form(s) 8949, I	from Part II,	Subtract column (e) from column (d) and combine the result			
whol	e dollars.			line 2, colum	n (g)	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								
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								
11	Box F checked	2439 and 6252	and long-term ga	in or (loss)					
••	from Forms 4684, 6781, and 8824				11				
12	Net long-term gain or (loss) from partnerships, S corporat				12				
	3				13				
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	=	our Capital Loss	_	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a	through 14 in co	olumn (h). Then, go	to Part III	15				

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 0. • 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. 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 0.) • (\$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.

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.

OMB No. 1545-0074 Attachment

Social security number or taxpayer identification number

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

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

Sequence No. 12A

JAYACHANDRA VARAPRASAD	REDDY TA	KKALA		840-09	-2008		
Before you check Box A, B, or C belo statement will have the same informa broker and may even tell you which b	tion as Form 1						
Part I Short-Term. Transa instructions). For low Note: You may agg reported to the IRS Schedule D, line 1a	ng-term trai regate all sl and for whi	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or cod	oorted on Form es are required	(s) 1099-E d. Enter th	showing basi e totals directly	s was / on
You must check Box A, B, or C k complete a separate Form 8949, p for one or more of the boxes, com	page 1, for ea oplete as mar	ach applicabl ny forms with	le box. If you have the same box o	ve more short-te hecked as you r	rm transac need.	tions than will fit	on this page
☐ (B) Short-term transactions ☐ (C) Short-term transactions			_	sis wasn't report	ed to the IF	RS	
1 (a) Description of property				(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). parate 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	10.	10.			0.
Totals. Add the amounts in columns negative amounts). Enter each total							

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.

10.

Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) .

10.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Your social security number

Name(s	s) shown on return						Your soci	al security ı	number	•
	ACHANDRA VARAPRASAD REDDY TAKKALA						840-0	9-2008		
Par	Income or Loss From Rental Real Estat Note: If you are in the business of renting personal prental income or loss from Form 4835 on page 2, lin	property, us		le C. See	instructio	ns. If you	are an indi	vidual, repo	ort farn	n
	Did you make any payments in 2023 that would require	e you to file								No
В	If "Yes," did you or will you file required Form(s) 1099	?						. \(\subseteq \text{Ye} \)	s 🗌	No
1a	Physical address of each property (street, city, stat	te, ZIP cod	de)							
Α	THORLIKONDA, MD: JAKRANPALLY NIZAMAB	AD TELA	NGANA	IN 503	3224					
В										
С	1									
1b	Type of Property (from list below) 2 For each rental real estate pabove, report the number of					Rental ays	Personal Use Days		QJΛ	
Α	gersonal use days. Check t			Α		365		0		$\overline{}$
В	if you meet the requirement			В		303				╤
C	qualified joint venture. See	instruction	is.	C						Ŧ
	of Property:									
	Single Family Residence 3 Vacation/Short-Term	n Rental	5 Lan	d	7 Se	If-Rental				
	Multi-Family Residence 4 Commercial		6 Roy	alties	8 Ot	her (desc	ribe)			
			1			Propert				
Incon	me:			Α		В			С	
3	Rents received	. 3		5	89.					
4	Royalties received									
Expe	nses:									
5	Advertising	. 5								
6	Auto and travel (see instructions)									
7	Cleaning and maintenance			1,3	86.					
8	Commissions									
9	Insurance	. 9								
10	Legal and other professional fees	. 10								
11	Management fees	. 11		8	76.					
12	Mortgage interest paid to banks, etc. (see instructio	ns) 12								
13	Other interest	. 13								
14	Repairs			1,5						
15	Supplies			1,8	37.					
16	Taxes	-								
17	Utilities			2,1						
18	Depreciation expense or depletion			3,8	86.					
19	Other (list)	19			0.1					
20	Total expenses. Add lines 5 through 19			11,6	81.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties	,								
	result is a (loss), see instructions to find out if you n file Form 6198			-11,0	92					
00			_	-11,0	92.					
22	Deductible rental real estate loss after limitation, if on Form 8582 (see instructions)		,	-11,09	2 \/		\	,		
23a	,		,	11,09	23a) 589.			
23a b	Total of all amounts reported on line 3 for all rental parts of all amounts reported on line 4 for all royalty			•	23b		507.			
C	Total of all amounts reported on line 4 for all royalty				23c					
d	Total of all amounts reported on line 12 for all prope				23d		3,886.			
e					23e		,681.			

Income. Add positive amounts shown on line 21. Do not include any losses

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here

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

24

25

26

11,092.

-11,092.

24

25

26

Form **8582**

Passive Activity Loss Limitations

See separate instructions.

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

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

OMB No. 1545-1008

2023

Attachment
Sequence No. 858

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Identifying number JAYACHANDRA VARAPRASAD REDDY TAKKALA 840-09-2008 Part I 2023 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a Activities with net income (enter the amount from Part IV, column (a)) . . . **b** Activities with net loss (enter the amount from Part IV, column (b)) 1b 11,092. c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . . **d** Combine lines 1a, 1b, and 1c 1d -11,092. **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a)) . . . **b** Activities with net loss (enter the amount from Part V, column (b)) 2b **c** Prior years' unallowed losses (enter the amount from Part V, column (c)) . 2c (2d Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules 3 -11,092. If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. 4 Enter the **smaller** of the loss on line 1d or the loss on line 3 11,092. 5 Enter \$150,000. If married filing separately, see instructions 150,000. Enter modified adjusted gross income, but not less than zero. See instructions 6 114,249. Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 7 Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 8 17,876. Enter the **smaller** of line 4 or line 8. If line 3 includes any CRD, see instructions 11,092. Part III **Total Losses Allowed** 10 0. 10 Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find 11 11,092. Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Part IV Overall gain or loss Current year Prior years Name of activity (c) Unallowed (a) Net income (b) Net loss (d) Gain (e) Loss (line 1a) loss (line 1c) (line 1b) 0. 11,092. 11,092. THORLIKONDA, MD: JAKRANPALLY

0.

11,092.

Total. Enter on Part I, lines 1a, 1b, and 1c

Form 8582 (2023) Page **2**

1 01111 0302 (202	0)									rage Z	
Part V	Complete This Part Before	e P	art I, Lines 2	a, 2b,	and 2c. S	ee instru	ctions.				
	Name of activity		Curren	ıt year		Prior years		Overall g		ain or loss	
	Name of activity	(a	(a) Net income (line 2a)		Net loss ne 2b)	(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss	
Total. Enter	on Part I, lines 2a, 2b, and 2c										
Part VI	Use This Part if an Amou	nt Is	Shown on F	Part II,	Line 9. S	ee instrud	ctions.				
	Name of activity	ar to	rm or schedule nd line number be reported on ee instructions)	(a) Loss	(b) Ra	atio	(c) Special allowance		(d) Subtract column (c) from column (a).	
THORLIKO	THORLIKONDA, MD: JAKRANPALLY		E Ln 22		11,092.		0000	11,09	2.	0.	
	•				•			•			
		-									
Total					11,092.	1.0	0	11,09	2	0.	
Part VII	Allocation of Unallowed L	os	ses. See instr	uction	S.	1				<u> </u>	
	Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	_oss	(1	b) Ratio	(c	e) Unallowed loss	
							-				
							1				
Total								1.00			
Part VIII	Allowed Losses. See instr								<u> </u>		
	Name of activity		Form or schedu and line numbe to be reported o (see instructions		mber ed on (a) L		(b) Un	allowed loss	((c) Allowed loss	
							-				
							-				
							-				
							1				
Total											