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	Se	ocial security	y number	
AKH	IL BANDARU		763-42-	8362	
Spouse	's name	Sı	pouse's soci	al security nu	mber
NIK	HITHA REPALA		164-53-	-8365	
Part	Tax Return Information — Tax Year Ending December	31, 2023 (Enter ye	ear you ar	e authoriz	ing.)
Enter	whole dollars only on lines 1 through 5.		-		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income			1 1	L63,179.
2	Total tax			2	20,404.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	21,945.
4	Amount you want refunded to you			4	1,541.
5	Amount you owe			5	
Part	II Taxpayer Declaration and Signature Authorization (Be	sure you get and kee	ep a copy	of your r	eturn)
return to send for any Agent to payme authori payme busines taxes to person	owledge and belief, it is true, correct, and complete. I further declare that the (original or amended) I am now authorizing. I consent to allow my intermediated my return to the IRS and to receive from the IRS (a) an acknowledgement of or delay in processing the return or refund, and (c) the date of any refund. If apply to initiate an ACH electronic funds withdrawal (direct debit) entry to the financiant of my federal taxes owed on this return and/or a payment of estimated tax, aization is to remain in full force and effect until I notify the U.S. Treasury Financial, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Pass days prior to the payment (settlement) date. I also authorize the financial into receive confidential information necessary to answer inquiries and resolve all identification number (PIN) below is my signature for the income tax return units of the payment (sentlement) and the payment of the income tax return the payment (sentlement) and the payment (sentlement) and the payment (sentlement) at a signature for the income tax return the payment (sentlement) and the payment (sentlement) are payment (sentlement) and the paymen	service provider, transmitte receipt or reason for rejective licable, I authorize the U.S. all institution account indicat and the financial institution tancial Agent to terminate the ayment cancellation requestitutions involved in the proper issues related to the payres.	r, or electro on of the tra Treasury ar ed in the ta o debit the e authoriza ts must be ocessing of ment. I furtl	nic return ori ansmission, (ad its designa x preparation entry to this ition. To revo received no the electroni ner acknowle	ginator (ERO) b) the reason ated Financial a software for account. This account (cancel) a later than 2 c payment of edge that the
	ayer's PIN: check one box only				
X		to enter or generate my	PINI 2	8 3 6	2 as my
	ERO firm name signature on the income tax return (original or amended) I am now a		Ent	er five digits, l 't enter all zer	out
	I will enter my PIN as my signature on the income tax return (origin if you are entering your own PIN and your return is filed using the below.	al or amended) I am now			
Yours	signature ▶	Date ▶			
0	and DIM about an about the				
	se's PIN: check one box only			0 2 6	_
×	I authorize GLOBAL TAXES LLC ERO firm name signature on the income tax return (original or amended) I am now a	to enter or generate my authorizing.	Ent	8 3 6 er five digits, l 't enter all zer	
	I will enter my PIN as my signature on the income tax return (origin if you are entering your own PIN and your return is filed using the below.				
Spous	se's signature ▶	Date ►			
	Practitioner PIN Method Returns Or	-			
Part	Certification and Authentication — Practitioner PIN M	ethod Only			
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-se	elected PIN. 2 2 2	4 9 6	or all zeros	7 1
authori	y that the above numeric entry is my PIN, which is my signature for the electrized to file for tax year indicated above for the taxpayer(s) indicated above. It ements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized	confirm that I am submittir	ng this retu	rn in accorda	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

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2023

OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20	See ser	parate instructions.
Your first name	e and m	uiddle initial	Last na	ame				Your so	cial security number
AKHIL			BANI	DARU				763	42 8362
-	spouse's	s first name and middle initial	Last na						s social security numbe
NIKHITH	A		REPA	ALA				164	53 8365
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.			Apt. no.	Preside	ntial Election Campaig
9861 VA	LLEY	RANCH PKWY W					2087		nere if you, or your
City, town, or p	oost offi	ice. If you have a foreign address, also co	mplete	spaces below.	Sta	ate	ZIP code		if filing jointly, want \$3 this fund. Checking a
IRVING					TΣ	K	75063		ow will not change
Foreign countr	y name			Foreign province/state/	coun ^e	ty	Foreign postal code	your tax	or refund.
									∐ You ☐ Spouse
Filing Status	_	」Single ☑ Married filing jointly (even if only o	no had	incomo)		☐ Head of no	ousehold (HOH)		
Check only		Married filing separately (MFS)	ne nau	income)		Ouglifying	surviving spouse	(088)	
one box.	L If \	0 , , ,	nama	of vour enquee. If you	u cha				ld's name if the
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the qualifying person is a child but not your dependent:							er trie crii	id 3 flame if the	
-									
Digital		ny time during 2023, did you: (a) reconange, or otherwise dispose of a digi	,		. ,		, ,,	` , ,	☐ Yes
Assets							i)? (See instruction	ons.)	∐ Yes ⊠ No
Standard Deduction	_	neone can claim:	•			•			
Deddellon	Ш.	Spouse iternizes on a separate return	11 O1 yO		allei				
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind Spo	ouse	: U Was bori	n before January		Is blind
Dependent				(2) Social security	/	(3) Relationshi	h 1, ,		fies for (see instructions)
If more	(1) ⊢	First name Last name		number		to you	Child tax o	reall	Credit for other dependent
than four dependents,									
see instruction	ıs								
and check	₁ —								
here L	10	Total amount from Form(s) W-2, be	ov 1 (co	o instructions)				. 1a	166,307.
Income	1a b	Household employee wages not re	,	,				. 1b	
Attach Form(s)	c	Tip income not reported on line 1a	•	` ,				. 1c	
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	•	•				. 1d	
W-2G and	e	Taxable dependent care benefits f		` , ` `				. 1e	
1099-R if tax was withheld.	f	Employer-provided adoption bene		•				. 16	
If you did not	g g	Wages from Form 8919, line 6.						. 1g	
get a Form	h	Other earned income (see instructi						. 1h	
W-2, see instructions.	i	Nontaxable combat pay election (s	,	ructions)		1i			
	z	Add lines 1a through 1h						. 1z	166,307.
Attach Sch. B	2a	1	2a		b T	axable interest		. 2b	156
if required.	3a	Qualified dividends	3a	219.	b C	Ordinary dividen	ds	. 3b	402.
	4a	IRA distributions	4a		b T	axable amount		. 4b	
Standard Deduction for—	5a	Pensions and annuities	5a		b T	axable amount		. 5b	
Single or	6a	Social security benefits	6a		b T	axable amount		. 6b	
Married filing separately,	С	If you elect to use the lump-sum e	lection	method, check here	(see	instructions)			
\$13,850 Married filing	7	Capital gain or (loss). Attach Scheo	dule D	if required. If not requ	uired	, check here		□ <u> </u>	-236.
jointly or	8	Additional income from Schedule	1, line 1	0				. 8	-3,450.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8.	This is your total inc	com	e		. 9	163,179.
\$27,700 Head of	10	Adjustments to income from Sche	dule 1,	line 26				. 10	1
household,	11	Subtract line 10 from line 9. This is	s your a	djusted gross incor	me			. 11	163,179.
\$20,800 If you checked	12	Standard deduction or itemized		•	,			. 12	, , , , , ,
any box under Standard	13	Qualified business income deducti	ion fron	n Form 8995 or Form	1 899	05-A		. 13	
Deduction, see instructions.	14							. 14	
JUU II ISLI UULIUI IS.	15	Subtract line 1/1 from line 11 If zer	n or loc	se ontor O. This is w	OUR !	tavahla incom	Δ .	15	135 475

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	20,404.
Credits	17	Amount from Schedule 2, lin	ne 3				[17	
	18	Add lines 16 and 17						18	20,404.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ne 8				[20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[22	20,404.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .		[23	0.
	24	Add lines 22 and 23. This is	your total tax				[24	20,404.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 21	,945.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	•					25d	21,945.
<u></u>	26	2023 estimated tax payment					T T	26	, , , , , , , , , , , , , , , , , , , ,
If you have a \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	27	Earned income credit (EIC)		• •		27			
attach Sch. EIC.	28	Additional child tax credit from			_	28			
	29	American opportunity credit				29			
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3. lin				31			
	32	Add lines 27, 28, 29, and 31						32	
	33	Add lines 25d, 26, and 32. T	•		-		+	33	21,945.
Refund	34	If line 33 is more than line 24						34	1,541.
Returna	35a	Amount of line 34 you want	-				· : :	35a	1,541.
Direct deposit?	b	Routing number 0 8 1					· □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	SSa	1,311.
See instructions.		Account number 3 5 5				J Checking	Saviriys		
		Amount of line 34 you want a				36			
A	36	•				30			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						07	
rou Owe	00	. , ,	· ·	•		1 1		37	
	38	Estimated tax penalty (see in				38			
Third Party		you want to allow another					omploto bo	olow	⊠ No
Designee				Phone			onal identific		△ NO
	nai	signee's me		no.			oer (PIN)	alion	
Sign	Un	der penalties of perjury, I declare tl	nat I have examined	d this return and	accompanying sche	edules and statement	ts, and to the	e best	of my knowledge and
Here	bel	ief, they are true, correct, and com	plete. Declaration	of preparer (othe	r than taxpayer) is b	ased on all information	on of which p	orepar	er has any knowledge.
пеге	Yo	ur signature		Date	Your occupation				nt you an Identity
									IN, enter it here
Joint return?					SOFTWARE :		(see in		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	tion			nt your spouse an ection PIN, enter it here
your records.					SOFTWARE	ENGINEER	(see in	•	cotion in in, critical it ficine
	———Ph	one no. (816)726-169		Email address		FO@GMAIL.CC)M		
-		eparer's name	Preparer's signat	l	AMITHDOTTI	Date	PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM	'		מווסדם דמו.ו.אא		P02082	703 	Self-employed
Preparer				MADAG PERM	OULTA TAULAN	1 02/20/2024	Phone		,
Use Only			AES LLC Y CT E BRU	MCWTOV M	J 08816		Firm's		04 2171065
Co to warming ==				TADMICK IN			rimin's	CIIN	84-3171965 Form 1040 (2023)
GO TO WWW.Irs.g	uv/rorn	n1040 for instructions and the late	st information.		BAA	REV 02/16/24 PRO			Form 1040 (2023)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR AKHIL BANDARU & NIKHITHA REPALA

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

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

	Sequence No. 01
Your soc	ial security number
763-42	-8362

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. Atta	ach Schedule E .	5	-3,450.
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		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-3,450.

Page 2 Schedule 1 (Form 1040) 2023

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN	· <u> </u>			
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	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		_	
j	Housing deduction from Form 2555	24j		-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k			
Z	Other adjustments. List type and amount:				
05		24z		0.5	
25 06	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10			06	
				26	
	BAA	REV 02/	16/24 PRO	Scnedu	ile 1 (Form 1040) 2023

SCHEDULE D (Form 1040)

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.

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/ScheduleD for instructions and the latest information. Name(s) shown on return Your social security number

763-42-8362 AKHIL BANDARU & NIKHITHA REPALA

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) lines below. Adjustments Subtract column (e) Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (g) 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 3,790. 3,967. 34. -143. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -143. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) (d) (e) Adjustments Subtract column (e) lines below.

This	form may be easier to complete if you round off cents to be dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, f line 2, colum	Part II,	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	544.	640.		3.	-93.
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 corporate	tions, 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 Worksheet in the instructions	14	()			
15	15	-93.				

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -236.• 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 236.) 21 • (\$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 X 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. Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074 Attachment

Sequence No. 12A

Internal Revenue Service Name(s) shown on return

Department of the Treasury

AKHIL BANDARU & NIKHITHA REPALA

Social security number or taxpayer identification number

763-42-8362

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	If you enter an amount in column (g) enter a code in column (f). See the separate instructions.		1 2 2 1 1		(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).		
Robinh	nood Securities LLC	01/01/23	12/31/23	3,790.	3,967.	W	34.	-143.		
nega Sche	Is. Add the amounts in column: tive amounts). Enter each tota dule D, line 1b (if Box A above	al here and inc e is checked), lir	lude on your ne 2 (if Box B	2 700	2 967		34	_143		

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

Form 8949 (2023) Attachment Sequence No. **12A** Page **2**

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side AKHIL BANDARU & NIKHITHA REPALA

Social security number or taxpayer identification number 763-42-8362

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☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on l	Form(s) 1099)-B showing bas	•		•	•)
(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	ustment, if any, to gain or loss u enter an amount in column (g), enter a code in column (f). Gain Subtract	
(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	01/01/22	12/31/23	544.	640.	W	3.	-93.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 8b (if Box D above	I here and inc	lude on your					

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

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

544.

640.

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.

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

AKHI	L BANDARU & NIKHITHA REPALA						763-4	2-8362	
Part									
	Note: If you are in the business of renting personal proper	rty, use	Schedule	C . See	instru	ctions. If you a	are an indiv	vidual, rep	ort farm
	rental income or loss from Form 4835 on page 2, line 40.		- () 4	2000					57
	Did you make any payments in 2023 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .							. <u></u> Ye	s U No
1a	Physical address of each property (street, city, state, ZII	P code	e)						
Α	CHITYAL NALGONDA TELANGANA IN 508114								
В									
С									
1b		above, report the number of fair rental			Fa	ir Rental Days	Person Da		QJV
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	quainled joint venture. See institu	ICTIONS	·- [С					
Туре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Ren	ıtal	5 Land		7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	ılties	8	Other (desc	ribe)		
						Propert			
lnoom				Α		Propert	ies.		С
Incon 3	Rents received	3			21.				<u> </u>
4	Royalties received	4		0	<u></u>				
Exper		4							
5	Advertising	5			1				
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		6	72.				
8	Commissions	8			72.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		2	50.				
12	Mortgage interest paid to banks, etc. (see instructions)	12			50.				
13	Other interest	13							
14	Repairs	14		7	81.				
15	Supplies	15		1,1					
16	Taxes	16							
17	Utilities	17		1,2	46.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		4,0	71.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If			-,-					
	result is a (loss), see instructions to find out if you must								
	file Form 6198	21		-3,4	50.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(3,45	0.)	()	(
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		621.		
b	Total of all amounts reported on line 4 for all royalty prop				23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	4	1,071.		
24	Income. Add positive amounts shown on line 21. Do not		de any los	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	s from lin	e 22. Eı	nter to	tal losses he	re 25	(3,450.
26	Total rental real estate and royalty income or (loss).	Combi	ne lines 2	24 and	25. E	nter the resu	ult		
	here. If Parts II, III, and IV, and line 40 on page 2 do no	t apply	y to you,	also e	nter th	nis amount o			
	Schedule 1 (Form 10/0) line 5. Otherwise, include this as	mount	in the tot	al on li	na /11	on nage 9	0.0		_2 /50

Form **8995**

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2023

Attachment Sequence No. **55**

Internal Revenue Service

Name(s) shown on return

Department of the Treasury

AKHIL BANDARU & NIKHITHA REPALA

Your taxpayer identification number 763-42-8362

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	, ,	(c) Qualified business income or (loss)		
i					
ii					
iii					
iv					
v					
2 3 4	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2 3 (
5 6	Qualified business income component. Multiply line 4 by 20% (0.20)	6 22.	5		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8 22.			
9 10	REIT and PTP component. Multiply line 8 by 20% (0.20)		10	4.	
11	Taxable income before qualified business income deduction (see instructions)	11 135,479.	10	4.	
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	12 219.			
13	Subtract line 12 from line 11. If zero or less, enter -0	13 135,260.			
14	Income limitation. Multiply line 13 by 20% (0.20) \cdot		14	27,052.	
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also the applicable line of your return (see instructions)		15	4.	
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	(0.)	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a zero, enter -0		17	(0.)	