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

Submission Identification Number (SID)					
Taxpayer's name	Social security number				
REVANTH AYALA SOMAYAJULA	684-36-7140				
Spouse's name Spouse's social se					
NARAYANI ALEKHYA MANTHA	989-96-8949				
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter	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.					
1 Adjusted gross income					
2 Total tax					
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	207.001				
4 Amount you want refunded to you	7,1231				
5 Amount you owe	5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)					
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indice payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requestions days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment or receive confidential information necessary to answer inquiries and resolve issues related to the payersonal identification number (PIN) below is my signature for the income tax return (original or amended) I am Electronic Funds Withdrawal Consent.	ction of the transmission, (b) the reason 5. Treasury and its designated Financial cated in the tax preparation software for n to debit the entry to this account. This the authorization. To revoke (cancel) ests must be received no later than 2 processing of the electronic payment of ayment. I further acknowledge that the				
Taxpayer's PIN: check one box only					
▼ I authorize GLOBAL TAXES LLC to enter or generate n	ny PIN 6 7 1 4 0 as my				
ERO firm name	Enter five digits, but don't enter all zeros				
signature on the income tax return (original or amended) I am now authorizing.	don tonioi un zoros				
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 methodelow.					
Your signature ▶ Date ▶					
Spouse's PIN: check one box only					
▼ I authorize GLOBAL TAXES LLC to enter or generate n ■ TAXES LLC to enter or gener					
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Enter five digits, but don't enter all zeros				
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 methodelow.	-				
Spouse's signature ▶ Date ▶					
Practitioner PIN Method Returns Only—continue below					
Part III Certification and Authentication — Practitioner PIN Method Only					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 6 0 8 2 7 1 Don't enter all zeros				
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Indicated above.	tting this return in accordance with the				
ERO's signature ▶ Date ▶					
ERO Must Retain This Form — See Instructions					

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

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



1040		cartment of the Treasury—Internal Revenue Servi .S. Individual Income Tax		urn	202	3	OMB No. 1545	-0074	IRS Use O	nly—Do no	t write or st	aple in this space.			
For the year Jar	n. 1–De	ec. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See s	eparate	instructions.			
Your first name	and n	niddle initial	Last na	me						Your	social se	curity number			
REVANTH			AYAL	A SOM	AYAJULA	1				684	1 36	7140			
If joint return, s	pouse	's first name and middle initial	Last na	me						Spous	e's socia	l security number			
NARAYAN:	I AL	EKHYA	MANT	'HA						989	96	8949			
Home address	(numb	per and street). If you have a P.O. box, see	instruction	ons.				А	pt. no.	Presid	dential El	ection Campaign			
104 SANI	DRA	ANN WAY									Check here if you, or your				
City, town, or p	ost of	fice. If you have a foreign address, also co	mplete s	paces belo	ow.	Sta	te	ZIP co	de		spouse if filing jointly, want \$3				
HUTTO						TX	Σ	786	34	-	to go to this fund. Checking a box below will not change				
Foreign countr	y name	9	F	Foreign pro	ovince/state/	count	у	Foreig	n postal cod		ax or ref	•			
											Y	ou Spouse			
Filing Status	s [Single	•				Head of he	ouseho	old (HOH)						
Check only		Married filing jointly (even if only or	ne had i	ncome)											
one box.		☐ Married filing separately (MFS)		,			☐ Qualifying	surviv	ing spous	e (QSS)					
	If	you checked the MFS box, enter the	name c	of your sp	ouse. If you	ı che	ecked the HOF	l or QS	SS box, er	nter the c	hild's na	ame if the			
	qı	ualifying person is a child but not you	ır depen	ndent:											
<u> </u>	^+ -	ti di 0000 did (-)	-: (
Digital Assets		any time during 2023, did you: (a) reco hange, or otherwise dispose of a digi									ı, □Y	es 🗵 No			
				•				1) ! (36	e mstruct	10115.)		es 🔼 NO			
Standard	_	meone can claim: You as a de	•				a dependent								
Deduction	Ш	Spouse itemizes on a separate return	n or you	were a c	iuai-status	allen									
Age/Blindnes	s You	u: Were born before January 2, 1	959	Are bli	nd Sp o	ouse	: Was bor	n befo	re Januar	y 2, 1959) <u></u>	ls blind			
Dependent	s (see	e instructions):		(2) So	ocial security	,	(3) Relationsh	ip (4)	Check the	box if qu	alifies for	(see instructions):			
If more		First name Last name			number		to you	.	Child tax	credit	Credit f	or other dependents			
than four															
dependents,	_														
see instruction and check	s —														
here]					
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instruct	ions) .						la	171,732.			
	b	Household employee wages not re	eported	on Form(s) W-2 .						lb				
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)									lc				
attach Forms	d	Medicaid waiver payments not rep	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								ld				
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom For	m 2441, l	line 26						le				
was withheld.	f	Employer-provided adoption bene									1f				
If you did not	g	Wages from Form 8919, line 6 .									lg				
get a Form W-2, see	h	Other earned income (see instructi	ions) .								lh	0.			
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)			1i								
	Z	Add lines 1a through 1h									Iz	171,732.			
Attach Sch. B	2a	Tax-exempt interest	2a			b Ta	axable interest			. 2	2b	2.			
if required.	3a	Qualified dividends	3a	1,	328.	b 0	rdinary divider	nds .		:	3b	1,560.			
	4a	IRA distributions	4a			b Ta	axable amoun	t		. 4	łb				
Standard Deduction for—	5a	Pensions and annuities	5a			b Ta	axable amoun	t			5b				
Single or	6a	Social security benefits	6a			b Ta	axable amoun	t		. [Sb S				
Married filing separately,	С	If you elect to use the lump-sum e	lection r	nethod, c	check here	(see	instructions)								
\$13,850	7	Capital gain or (loss). Attach Scheo	dule D if	f required	. If not requ	uired,	, check here				7	107.			
 Married filing jointly or 	8	Additional income from Schedule	1, line 10	0							8	-13,275.			
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8.	This is yo	our total inc	ome	e				9	160,126.			
\$27,700	10	Adjustments to income from Sche	dule 1, l	ine 26						. [-	10				
Head of household,	11	Subtract line 10 from line 9. This is	s your a c	djusted g	ross incor	ne				. [11	160,126.			
\$20,800 If you checked	12	Standard deduction or itemized	deducti	ions (fron	n Schedule	A)				. [12	27,700.			
any box under	13	Qualified business income deducti	ion from	Form 89	95 or Form	899	5-A			. [-	13	2.			
Standard Deduction,	14	Add lines 12 and 13								. [-	14	27,702.			
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -(0 This is y	our t	axable incom	е.		. [-	15	132,424.			

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	19,648.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	19,648.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne 8					20	1,988.
	21	Add lines 19 and 20						21	1,988.
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				22	17,660.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	17,660.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a 2	26,785		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	26,785.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	022 return			26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, line 8 . .		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	26,785.
Refund	d 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid .							34	9,125.
	35a	Amount of line 34 you want	35a	9,125.					
Direct deposit?	b	Routing number 1 1 1			c Type:	Checking [Savings		
See instructions.	d	Account number 3 8 0	6 7 3 0	1 9					
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe					
You Owe		For details on how to pay, g	o to <i>www.irs.go</i> u	//Payments or	see instructions			37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party		you want to allow another	•			_			
Designee							Complete		⊠ No
	De nai	signee's me		Phone no.			rsonal iden mber (PIN)	tification	
Sign		der penalties of perjury, I declare t	hat I have examined		accompanying sche			the best	of my knowledge and
_	bel	ief, they are true, correct, and com	plete. Declaration of	of preparer (othe	r than taxpayer) is b	ased on all informa	ation of whi	ch prepar	er has any knowledge.
Here	Yo	ur signature		Date	Your occupation				nt you an Identity
						-		tection P e inst.)	IN, enter it here
Joint return?					SENIOR SOFT		FEK ,		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, l	both must sign.	Date	Spouse's occupat	ion			nt your spouse an ection PIN, enter it here
your records.					HOME MAKE	I .	e inst.)		
	Ph	one no. (515)664-422	0	Email address	REVANTH.A1				
		eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/07/2024	P0208	32703	Self-employed
Preparer		m's name GLOBAL TA	1			•			(678)965-9522
Use Only	Fire		Y CT E BRU	NSWICK N	J 08816		Fire	n's EIN	84-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment

Department of the Treasury Internal Revenue Service

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

REVANTH AYALA SOMAYAJULA & NARAYANI ALEKHYA MANTHA

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

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

Attachment Sequence No. 01 Your social security number

684-36-7140

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		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	-13,275.
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 . Enter			
	1040. 1040-SR. or 1040-NR. line 8		10	-13,275.

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee				
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN	·			
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e		_	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful				
	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:				
0E	Total ather adjustments Add lines 04s through 04s	24z			
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	. Enter	nere and on	06	
				26	I- 4 (F 4040) 2222
	BAA	REV 03/	04/24 PRO	ocnedu	le 1 (Form 1040) 2023

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

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

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

OMB No. 1545-0074

2023

Attachment
Sequence No. 03

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

REVANTH AYALA SOMAYAJULA & NARAYANI ALEKHYA MANTHA

Your social security number 684-36-7140

Par	Nonrefundable Credits					
1	Foreign tax credit. Attach Form 1116 if required			1		
2	Credit for child and dependent care expenses from Form 2441 Form 2441	l, line	e 11. Attach	2		
3	Education credits from Form 8863, line 19			3	1,988	
4	Retirement savings contributions credit. Attach Form 8880			4		
5a	Residential clean energy credit from Form 5695, line 15			5a		
b	Energy efficient home improvement credit from Form 5695, line 32			5b		
6	Other nonrefundable credits:					
а	General business credit. Attach Form 3800	6a				
b	Credit for prior year minimum tax. Attach Form 8801	6b				
С	Adoption credit. Attach Form 8839	6с				
d	Credit for the elderly or disabled. Attach Schedule R	6d				
е	Reserved for future use	6e				
f	Clean vehicle credit. Attach Form 8936	6f				
g	Mortgage interest credit. Attach Form 8396	6g				
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h				
i	Qualified electric vehicle credit. Attach Form 8834	6i				
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j				
k	Credit to holders of tax credit bonds. Attach Form 8912	6k				
I	Amount on Form 8978, line 14. See instructions	6I				
m	Credit for previously owned clean vehicles. Attach Form 8936 .	6m				
z	Other nonrefundable credits. List type and amount:					
		6z				
7	Total other nonrefundable credits. Add lines 6a through 6z			7		
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10 1040-NR, line 20	040,	1040-SR, or	8	1,988	

Schedule 3 (Form 1040) 2023 Page **2**

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld	11		
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for repayment of amounts included in income from earlier years	13b		
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c		
d	Deferred amount of net 965 tax liability (see instructions)	13d		
Z	Other payments or refundable credits. List type and amount:	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	

SCHEDULE B (Form 1040)

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Part I

REVANTH AYALA SOMAYAJULA & NARAYANI ALEKHYA MANTHA

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR.

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

List name of payer. If any interest is from a seller-financed mortgage and the

OMB No. 1545-0074

Attachment Sequence No. 08

Amount

Your social security number 684-36-7140

Interest		buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:		
(See instructions and the Instructions for Form 1040, line 2b.)		Robinhood Securities LLC INTEREST		1.
Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that			1	
form.	0	Add the execute on line 1		
	2 3	Add the amounts on line 1	3	2.
	4	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b	4	2.
	Note:	If line 4 is over \$1,500, you must complete Part III.	1	Amount
Part II	5	List name of payer: Robinhood Securities LLC		235.
		FIDELITY BROKERAGE SERVICES LLC		779.
Ordinary		Betterment Securities, Broker-Dealer		360.
Dividends		DIVIDEND		186.
(See instructions and the Instructions for Form 1040,			5	
line 3b.)			5	
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the				
payer and enter				
the ordinary dividends shown	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6	1,560.
on that form.		If line 6 is over \$1,500, you must complete Part III.		
Part III Foreign	You m	nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary dnt; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign		
Accounts				Yes No
and Trusts	72	At any time during 2023, did you have a financial interest in or signature authority of	over a	
Caution: If required, failure to		account (such as a bank account, securities account, or brokerage account) locate country? See instructions	ed in	
file FinCEN Form 114 may result in substantial penalties. Additionally, you		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See FinC and its instructions for filing requirements and exceptions to those requirements.	CEN F	orm 114
may be required to file Form 8938, Statement of Specified Foreign		If you are required to file FinCEN Form 114, list the name(s) of the foreign country(financial account(s) is (are) located:		
Financial Assets. See instructions.	8	During 2023, did you receive a distribution from, or were you the grantor of, or t foreign trust? If "Yes," you may have to file Form 3520. See instructions	ransfe	eror to, a

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. Go to www.irs.gov/ScheduleD for instructions and the latest information. OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service

Name(s) shown on return Your social security number 684-36-7140 REVANTH AYALA SOMAYAJULA & NARAYANI ALEKHYA MANTHA

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) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. line 2. column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 36. 2. 31. -3. 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 -3. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with 1,290. 1,400. 110. 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 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

110.

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 107. • 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? X 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? X 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 • (\$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. 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

REVANTH AYALA SOMAYAJULA & NARAYANI ALEKHYA MANTHA

Social security number or taxpayer identification number 684-36-7140

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 F	orm 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) If you enter an a Cost or other basis See the Note below See the sepa		See the separate instructions.	
(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).
Betterment Securities, Broker-Dealer	01/01/23	12/31/23	31.	36.	W	2.	-3.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc is checked), lir	lude on your ne 2 (if Box B	31.	36.		2.	-3.

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 REVANTH AYALA SOMAYAJULA & NARAYANI ALEKHYA MANTHA

Social security number or taxpayer identification number $6\,8\,4-3\,6-7\,1\,4\,0$

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

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

 ☒ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) ☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS ☐ (F) Long-term transactions not reported to you on Form 1099-B 											
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). 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	01/01/22	12/31/23	1,400.	1,290.			110.				
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 D	I here and inc is checked), lir	lude on your ne 9 (if Box E	1,400.	1,290.			110.				

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.

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

REVA	ANTH AYALA SOMAYAJULA & NARAYANI ALEKHY	A MAI	NTHA				684-36	6-7140	
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	nd Ro rty, use	yalties Schedule	c . See	instru	ctions. If you ar	e an indiv	ridual, rep	ort farm
Α	Did you make any payments in 2023 that would require you								
	If "Yes," did you or will you file required Form(s) 1099? .								
1a	Physical address of each property (street, city, state, ZI								
Α	K.T.R.COLONY NIZAMPET HYDERABAD IN 500	0090							
В									
С									
1b	Type of Property (from list below) 2 For each rental real estate properation above, report the number of fair	rental	and		Fa	ir Rental Days	Person Day		QJV
Α	personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to qualified joint venture. See instru			В					
С	quaimed joint venture. See instit	JOHOH	5.	С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya	-		Self-Rental Other (descri			
						Propertie	es:		
Incon				Α		В			С
3	Rents received	3		6	03.				
4	Royalties received	4							
Expe		_							
5	Advertising	5 6							
6 7	Auto and travel (see instructions)	7		1,5	10				
8	Commissions	8		1,5	40.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,1	63				
12	Mortgage interest paid to banks, etc. (see instructions)	12		т, т	03.				
13	Other interest	13							
14	Repairs	14		1,8	79				
15	Supplies	15		2,1					
16	Taxes	16							
17	Utilities	17		2,7	64.				
18	Depreciation expense or depletion	18			56.				
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		13,8	78.				
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		-13,2	75.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		13,27		()((
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		603.		
b	Total of all amounts reported on line 4 for all royalty prop	erties			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	4	,356.		
е	Total of all amounts reported on line 20 for all properties				23e	13	,878.		
24	Income. Add positive amounts shown on line 21. Do no		-				. 24		
25	Losses. Add royalty losses from line 21 and rental real estat	te losse	es from lin	ie 22. Ei	nter to	tal losses here	25	(13,275.
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this a						n . 26		-13,275.

Form **8863**

Education Credits (American Opportunity and Lifetime Learning Credits)

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

you complete Parts I and II.

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/Form8863 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. 50

Your social security number

A

REVANTH AYALA SOMAYAJULA & NARAYANI ALEKHYA MANTHA 684 36 7140

Complete a separate Part III on page 2 for each student for whom you're claiming either credit before

Par	Refundable American Opportunity Credit		
1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse		
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead		
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit		
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse		
6	If line 4 is: • Equal to or more than line 5, enter 1.000 on line 6	6	
	at least three places)		
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year and meet the conditions described in the instructions, you can't take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box	7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the amount here and	-	
	on Form 1040 or 1040-SR, line 29. Then go to line 9 below.	8	
Part			
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions) .	9	
10	After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19	10	23,303.
11 12	Enter the smaller of line 10 or \$10,000	11 12	10,000.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse		
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse		
17	If line 15 is:		
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18		
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to at least three places)	17	0.994
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) .	18	1,988.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see instructions) here and on Schedule 3 (Form 1040), line 3	19	1,988.

BAA

Name(s) shown on return	Your social	security	number
DEVINITU AVALA COMAVATILA C. NADAVANT ALEKUVA MANTUA	684	36	7140

	Λ			
CA	UT	101		

Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

Par	t III Student and Educational Institution Information	n. See instructions.		
	Student name (as shown on page 1 of your tax return) NARAYANI ALEKHYA MANTHA	21 Student social security number (as shown on page 1 of your tax return) 989-96-8949		
22	Educational institution information (see instructions)	303 30 03 13		
	Name of first educational institution	b. Name of second educational institut	on (if anv)	
	THE UNIVERSITY OF TEXAS AT AUSTIN OFFICE OF ACCOUNTING		())	
(Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. MAIN BUILDING, ROOM 4 AUSTIN TX 78712 (512) 475-7771 	(1) Address. Number and street (or P. post office, state, and ZIP code. If instructions.		
(2) Did the student receive Form 1098-T from this institution for 2023? ▼ Yes □ No	(2) Did the student receive Form 1098 from this institution for 2023?	-T	
(3) Did the student receive Form 1098-T from this institution for 2022 with box ☐ Yes ☒ No 7 checked?	(3) Did the student receive Form 1098 from this institution for 2022 with b 7 checked?		
(4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	(4) Enter the institution's employer ide if you're claiming the American opposed checked "Yes" in (2) or (3). You can 1098-T or from the institution.	ortunity credit or if you	
	74-6000203			
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?	☐ Yes — Stop! Go to line 31 for this student. 🗵 No	Go to line 24.	
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2023 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.		— Stop! Go to line 31 his student.	
25	Did the student complete the first 4 years of postsecondary education before 2023? See instructions.	X Yes − Stop! Go to line 31 for this student. No	- Go to line 26.	
26	Was the student convicted, before the end of 2023, of a felony for possession or distribution of a controlled substance?	Yes — Stop! Go to line 31 for this student. No thro	Complete lines 27 ugh 30 for this student.	
CAUT	You can't take the American opportunity credit and the layou complete lines 27 through 30 for this student, don't don't		in the same year. If	
	American Opportunity Credit			
27	Adjusted qualified education expenses (see instructions). Dor		27	
28	,		28	
29			29	
30	If line 28 is zero, enter the amount from line 27. Otherwise, enter the result. Skip line 31. Include the total of all amounts f		30	
	Lifetime Learning Credit	ioni an i arto III, IIIIe ou, Uli Fait I, IIIIe I .	JU	
31	Adjusted qualified education expenses (see instructions). Incl	ude the total of all amounts from all Parts		
٥,	III line 31 on Part II line 10	ado the total of all amounts from all Falts	31 23.303.	

Department of the Treasury

Internal Revenue Service

Health Savings Accounts (HSAs)

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form8889 for instructions and the latest information. OMB No. 1545-0074 Attachment Sequence No. 52

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

REVANTH AYALA SOMAYAJULA

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. 684-36-7140

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required. HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse. Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2023. ☐ Self-only X Family 2 HSA contributions you made for 2023 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2023. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions 2 0. If you were under age 55 at the end of 2023 and, on the first day of every month during 2023, you 3 were, or were considered, an eligible individual with the same coverage, enter \$3,850 (\$7,750 for 3 7,750. Enter the amount you and your employer contributed to your Archer MSAs for 2023 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2023, also 4 0. 5 5 7,750. 6 Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2023, see the instructions for the amount to enter . . . 6 7,750. If you were age 55 or older at the end of 2023, married, and you or your spouse had family coverage 7 under an HDHP at any time during 2023, enter your additional contribution amount. See instructions . 7 7,750. 8 8 9 Employer contributions made to your HSAs for 2023 10 2,800. 11 11 12 12 4,950. HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13 13 13 0. Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions. HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete Part II a separate Part II for each spouse. 14a Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were 14b 14c Qualified medical expenses paid using HSA distributions (see instructions) 15 15 Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this 16 16 If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before Part III completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse. 18 18 19 19 20 Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f 20 Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 21

21

Form **8995**

Department of the Treasury

Internal Revenue Service

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. 154<u>5-2294</u>

2023

Attachment Sequence No. **55**

Name(s) shown on return

REVANTH AYALA SOMAYAJULA & NARAYANI ALEKHYA MANTHA

Your taxpayer identification number 684-36-7140

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	(b) Taxpayer identification number	(c) Qualified business income or (loss)	
i				
ii				
iii				
iv				
v				
3 4	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	3 (
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6 12.		
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 12.		
9	· · · · · · · · · · · · · · · · · · ·		9	2.
10	Qualified business income deduction before the income limitation. Add lines 5 an	i i	10	2.
11	Taxable income before qualified business income deduction (see instructions)	11 132,426.	_	
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	12 1,435.		
13	Subtract line 12 from line 11. If zero or less, enter -0	130,991.		0.5 1.00
14	Income limitation. Multiply line 13 by 20% (0.20)		14	26,198.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also the applicable line of your return (see instructions)		15	2.
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	nd 7. If greater than	17	(0.)