Form 8879
(Rev. January 2021)
Department of the Treesury

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpay	er's name		Social	security	y numb	er
AKS	HAY REDDY AKKATI		656	-99-	-1944	1
Spouse	's name	Spouse's social security number				rity number
Par	t I Tax Return Information – Tax Year Ending December 31, 202	3 (Ente	ı r year y	ou ar	re aut	horizing.)
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	110,729.
2	Total tax				2	16,645.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099				3	22,478.
4	Amount you want refunded to you				4	5,833.
5	Amount you owe				5	

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

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

~ ~ ~ ~ ~ ~ ~				
GLOBAL	TAXES	LГС	to enter or generate my	' PIN

9	1	9	4	4	
	er fiv n't er	as my			

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date 🕨

Spouse's PIN: check one box only

I authorize

X I authorize

to	enter	or	generate	my	PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►	Date 🕨
Practitioner PIN Me	thod Returns Only—continue below
Part III Certification and Authentication – Pra	ctitioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by yo	ur 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 return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨						
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So								
For Denemicarly Deduction Act Nation and vourt	v veture instructions		Form 8879 (Pov. 01 2021)					

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/07/24 PRO

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		turn	202	3	OMB No. 1545	-0074	IRS Use Only	/—Do not w	/rite or sta	aple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number
AKSHAY F	REDD	Y	AKK	ATI						656	99	1944
If joint return, s	pouse's	s first name and middle initial	Last r	name						Spouse	's social	I security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.			ection Campaigr
<u>1117 LAC</u>					1	0.			l -			ou, or your jointly, want \$3
		ce. If you have a foreign address, also co	mplete	spaces be	elow.	Sta		ZIP co		to go to	this fu	nd. Checking a
INDIAN T				Foroign n	vrovince/state/		-	280	/9 n postal code			not change
r oreign country	/ name			roreigirp	IOVINCE/State/	courn	ıy	i oreig	n postal coue	your ta		_
Filing Status		Single					Head of h	ouseh	old (HOH)			
-	, _	Married filing jointly (even if only o	ne hac	l income)				oucon				
Check only one box.] Married filing separately (MFS)					Qualifying	surviv	ing spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name	of your s	pouse. If you	u che			- ·		ild's na	me if the
		alifying person is a child but not you										
Digital	Δt ar	ny time during 2023, did you: (a) rec	oivo (a	s a rowar	d award or	navr	ment for prope	rty or	services): or	(b) sell		
Digital Assets		hange, or otherwise dispose of a dig						-	,	. ,		es 🛛 No
Standard		neone can claim: 🗌 You as a de					a dependent	, ,		,		
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	1					
Age/Blindness	s You	: Were born before January 2, 1	959	Are b	lind Spa	ouse	: 🗌 Was bor	n befc	ore January	2, 1959		s blind
Dependents				<u> </u>	Social security		(3) Relationsh	14				(see instructions):
If more		irst name Last name		(number		to you		Child tax credi		Credit fo	or other dependents
than four												
dependents, see instructions												
and check	>											
here												
Income	1a	Total amount from Form(s) W-2, b			,						-	121,097.
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2							. 1b			
W-2 here. Also	C	Tip income not reported on line 1a	•		•					. 10		
attach Forms W-2G and	d	Medicaid waiver payments not rep			, ,			• •		. 1d		
1099-R if tax	e	Taxable dependent care benefits f						• •	· · ·	. 1e		
was withheld.	f	Employer-provided adoption bene						• •		. 1f . 1g		
get a Form	y h	Wages from Form 8919, line 6 .				• •		• •	• • •	· <u>ry</u> . 1h		0.
W-2, see instructions.	i	· ·	Other earned income (see instructions)									
	z	Add lines 1a through 1h								. 1z		121,097.
Attach Sch. B	2a	Tax-exempt interest	2a			bТ	axable interest	t.		. 2b		
if required.	3a		3a		44.	bС	Drdinary divide	nds .		. 3b)	44.
	4a	IRA distributions	4a			bΤ	axable amoun	t		. 4b)	
Standard Deduction for—	5a	Pensions and annuities	5a			bΤ	axable amoun	t		. 5b)	
 Single or 	6a	Social security benefits	6a			bΤ	axable amoun	t		. 6b)	
Married filing separately,	С	If you elect to use the lump-sum e	lectior	n method,	check here	(see	instructions)		[
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche		•	•		-		[7		1,254.
jointly or Qualifying	8	Additional income from Schedule	,							. 8	_	-11,666.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						• •		. 9		110,729.
\$27,700 • Head of	10	Adjustments to income from Sche						• •		. 10		110 500
household, [\$20,800	11	Subtract line 10 from line 9. This is	•	-	-			• •		. 11	-	110,729.
 If you checked any box under 	<u>12</u> 13	Standard deduction or itemized Qualified business income deduct					 	• •	· · ·	. <u>12</u> . 13	_	13,850.
Standard	13 14				อออ บเ คบเก	099	J-A	• •		. 13		13,850.
Deduction, see instructions.	14	Add lines 12 and 13 Subtract line 14 from line 11. If zer		ss. enter	-0 This is v	 'Our f	taxable incom	 Ie	· · ·	. 15		96,879.
			5 51 10		5 . 1115 13 y	Juil				. 10		

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

Form **1040** (2023)

Form 1040 (2023	3)							Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌	16	6 16,645.
Credits	17	Amount from Schedule 2, lir	ne3				17	7
	18	Add lines 16 and 17					18	B 16,645.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812		19	9
	20	Amount from Schedule 3, lir	ne8				20	0
	21	Add lines 19 and 20					2	1
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			22	2 16,645.
	23	Other taxes, including self-e					23	
	24	Add lines 22 and 23. This is	your total tax				24	
Payments	25	Federal income tax withheld						
, ,	а	Form(s) W-2				25a 22	,478.	
	b	Form(s) 1099				25b		
	с	Other forms (see instruction	s)			25c		
	d	Add lines 25a through 25c	<i>.</i>				25	d 22,478.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	22 return .		26	
qualifying child,	27	Earned income credit (EIC)			No	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, lir				31		
	32	Add lines 27, 28, 29, and 31				undable credits	32	2
	33	Add lines 25d, 26, and 32. T	,	•	•			
Refund	34	If line 33 is more than line 24					34	4 5,833.
norunu	35a	Amount of line 34 you want	-			, .	. 🗌 35	a 5,833.
Direct deposit?	b	Routing number $0 5 2 0 0 1 6 3 3 $ c Type: X Checking Savings						
See instructions.	d	Account number 4 4 6 0 4 4 1 6 2 2 7 0						
	36	Amount of line 34 you want a				36		
Amount	37	Subtract line 33 from line 24						
You Owe	01	For details on how to pay, g					37	7
	38	Estimated tax penalty (see in				38		
Third Party	Do	you want to allow another				See		
Designee		tructions	•				omplete belov	v. 🗙 No
U	De	signee's		Phone			onal identificatio	on
	nai			no.			ber (PIN)	
Sign		der penalties of perjury, I declare tl ief, they are true, correct, and com						
Here			piete. Deciaration	、	,			, 0
	Yo	ur signature		Date	Your occupation			sent you an Identity n PIN, enter it here
Joint return?					SOFTWARE I	ENGINEER	(see inst.)	
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat		If the IRS	sent your spouse an
Keep a copy for your records.	-		-					rotection PIN, enter it here
your records.							(see inst.)	
		one no.		Email address	AKSHAYREDDYA	KKATI@GMAIL.CO		
Paid		eparer's name	Preparer's signat			Date	PTIN	Check if:
Preparer	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAG	GAR GUPTA	03/17/2024	P0208270	
Use Only	Fir	n's name GLOBAL TA	XES LLC				Phone no	. (678)965-9522
	Firi	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's EIN	
Go to www.irs.go	ov/Form	n1040 for instructions and the late	st information.		BAA	REV 03/07/24 PRO		Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 23

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01		
Name(s) shown on Form 1040, 1040-SR, or 1040-NR			Your social security number		
AKSHAY REDDY A	KKATI	656-99	-1944		
Part I Additio	onal Income				

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. Atta	ach Schedule E .	5	-11,666.
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		
I	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, SP, or 1040, NP, line 8	r nere and on Form		11 666
	1040, 1040-SR, or 1040-NR, line 8		10	-11,666.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedule	e 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	s 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			
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:			
 a	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the		-	
D	rental of personal property engaged in for profit			
с	Nontaxable amount of the value of Olympic and Paralympic medals		-	
C	and USOC prize money reported on line 8m			
d			-	
	Repayment of supplemental unemployment benefits under the Trade		-	
е	Act of 1974			
			-	
f			-	
g	Contributions by certain chaplains to section 403(b) plans 24g		-	
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)		-	
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations		-	
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter	er here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	<u></u>	26	
	BAA REVO)3/07/24 PRO	Schedule 1 (F	orm 1040) 202

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Go to www.irs.gov/ScheduleD for instructions and the latest information.

20Attachment Sequence No. 12

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

AKSHAY REDDY AKKATI

Your social security number 656-99-1944

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes × No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, P line 2, column		combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	7,998.	6,462.	1	04.	1,640.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1			usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	-	-	6	()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	0	()	, ,	7	1,640.

Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (see instructions)

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	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	89.	475.			-386.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Sched	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	Net long-term capital gain or (loss). Combine lines 8a on the back .	•			15	-386.

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 1,254.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 both gains?	
	No. Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. 	
	☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 ()
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

BAA REV 03/07/24 PRO

Schedule D (Form 1040) 2023

Form **8949**

Department of the Treasury

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.



Internal Revenue Service Name(s) shown on return

Social security number or taxpayer identification number

AKSHAY REDDY AKKATI	656-99-1944
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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 enter a c	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ	2 Co.) (I	[Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see <i>Column</i> (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	s LLC 0	1/01/23	12/31/23	7,998.	6,462.	W	104.	1,640.	
2 Totals. Add the amounts in negative amounts). Enter e Schedule D, line 1b (if Box above is checked), or line 3	each total h A above is	here and incluction checked), lin	ude on your e 2 (if Box B	7,998.	6,462.		104.	1,640.	

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

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

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Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side AKSHAY REDDY AKKATI

Social security number or taxpayer identification number 656-99-1944

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

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

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

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

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

[] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Example: 100 sh. XYZ Co.) Date acquired disposed of (Mo., day, yr.)		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	89.	475.			-386.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box I	I here and inc is checked), lir	lude on your 1e 9 (if Box E	89.	475.			-386.

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

REV 03/07/24 PRO

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

Department of the Treasury

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

2023
Attachment Sequence No. 13

au/CahadulaEfax instructions and the latest infe

Internal	Revenue Service	do to www.irs.gov/ScheduleE to	minsur	uctions an		itest in	iormation.			ce No. IJ
. ,	shown on return								ial security i	
	AY REDDY AKKA							656-9	9-1944	
Part	Note: If you a	Loss From Rental Real Estate and re in the business of renting personal proper or loss from Form 4835 on page 2, line 40.			e C . See	e instrue	ctions. If you	are an indi	vidual, rep	ort farm
A		ayments in 2023 that would require you	ı to file	Form(s) 1	099? 8	See ins	tructions .		. 🗌 Ye	s 🛛 No
	f "Yes," did you or	will you file required Form(s) 1099?								
1a	Physical address	s of each property (street, city, state, ZI	P cod	e)						
Α	ADVOCATES CO	OLONY, HANAMKOND WARANGAL	TELAI	NGANA I	IN 50	6001				
В										
С		1				1		1		
1b	Type of Property (from list below)	2 For each rental real estate proper above, report the number of fair	rental	and		Fa	ir Rental Days		nal Use ays	QJV
Α	3	personal use days. Check the Q			Α		365		0	
В		if you meet the requirements to qualified joint venture. See instru			В					
С				5.	С					
	of Property:									
	Single Family Resid		ntal	5 Land			Self-Rental			
2	Multi-Family Reside	ence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
							Propert	ies:		
ncom	ie:				Α		B			С
3	Rents received .		3		5	84.				
4	Royalties received		4							
Expen	ises:									
5	Advertising		5							
6		ee instructions)	6							
7		ntenance	7		1,3	84.				
8	Commissions .		8							
9	Insurance		9							
10		rofessional fees	10							
11		8	11		8	17.				
12		paid to banks, etc. (see instructions)	12							
13			13							
14			14			79.			ļ	
15			15		2,0	16.				
16			16		0 0	1.0				
17		· · · · · · · · · · · · · · · · · · ·	17			18.				
18 19		ense or depletion	18 19		3,8	36.				
20	Other (list)	Add lines 5 through 19	20		12,2	50				
20	•	rom line 3 (rents) and/or 4 (royalties). If	20		12,2	50.				
21	result is a (loss), s	see instructions to find out if you must	21		-11,6	66				
22	Deductible rental	real estate loss after limitation, if any, e instructions) .	22		11,60		()	(
23a		its reported on line 3 for all rental prope				23a	\	584.	N	
b		its reported on line 4 for all royalty prop				23b				
c		its reported on line 12 for all properties				23c				
d		its reported on line 18 for all properties				23d		3,836.		
е		its reported on line 20 for all properties				23e		2,250.		
24		itive amounts shown on line 21. Do no				· · ·		. 24		
25	Losses. Add royalt	ty losses from line 21 and rental real estat	te loss	es from lin	e 22. E	nter to	tal losses he	re 25	(11,666.
26		estate and royalty income or (loss).								
	here. If Parts II, II	I, and IV, and line 40 on page 2 do no	ot app	ly to you,	also e	nter th	nis amount (on		

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

-11,666.

26

Departn	B582 ment of the Treasury Revenue Service	Passive Activity Loss Limitations See separate instructions. Attach to Form 1040, 1040-SR, or 1041. Go to www.irs.gov/Form8582 for instructions and the latest int		ation.
Name(s	s) shown on return			lde
AKSI	HAY REDDY A	KKATI		6!
		ctivities With Active Participation (For the definition of active participal Real Estate Activities in the instructions.)	ation	, see Specia l
1a	Activities with	net income (enter the amount from Part IV, column (a)) 1a		0.
b		net loss (enter the amount from Part IV, column (b))	(11,666.
С	Prior years' una	allowed losses (enter the amount from Part IV, column (c)) 1c	(
d	Combine lines	1a, 1b, and 1c		
All Ot	ther Passive Act	tivities		
2a	Activities with	net income (enter the amount from Part V. column (a))		

2a	Activities with net income (enter the amount from Part V, column (a))	2a				
b	Activities with net loss (enter the amount from Part V, column (b))	2b	()		
С	Prior years' unallowed losses (enter the amount from Part V, column (c))	2c	()		
d	Combine lines 2a, 2b, and 2c				2d	
3	Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instr zero or more, stop here and include this form with your return; all losses are a prior year unallowed losses entered on line 1c or 2c. Report the losses on the					
	normally used				3	-11,666.

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 . . 4 11,666. 5 5 Enter \$150,000. If married filing separately, see instructions 150,000. 6 Enter modified adjusted gross income, but not less than zero. See instructions 6 122,395. 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 7 27,605. Multiply line 7 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions 8 8 13,803. 9 9 11,666. **Total Losses Allowed** Part III 10 10 0. 11 Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find 11 11,666. Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions.

	Currer	nt year	Prior years	Overall ga	l gain or loss	
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss	
ADVOCATES COLONY, HANAMKOND	0.	11,666.			11,666.	
Total. Enter on Part I, lines 1a, 1b, and 1c	0.	11,666.				

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REV 03/07/24 PRO

Form 8582 (2023)

OMB No. 1545-1008 20

-11,666.

Attachment Sequence No. 858

Identifying number 656-99-1944

1d

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

Part V Complete This Part Belo		a, 20,	anu 20. 0		JUONS.				
Name of activity	Current year			Prior years		Overall gain or loss			
Name of activity	(a) Net income (line 2a)	(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)				(e) Loss	
	((10 2.0)		0 20)				
Total. Enter on Part I, lines 2a, 2b, and 2c									
Part VI Use This Part if an Amou	Int Is Shown on F	Part II,	Line 9. S	l See instruc	tions.				
Name of activity	Form or schedule and line number to be reported on (see instructions)	and line number o be reported on (a		(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).	
ADVOCATES COLONY, HANAMKOND	E Ln 22	E Ln 22 11,666.		1.00000000		11,666.		0.	
							_		
Total			11,666.	1.0	0	11,66	6.	0.	
Part VII Allocation of Unallowed			S.				-		
Name of activity	Form or sche and line nur to be reporte (see instruct	imber ted on (a) L		Loss		(b) Ratio ((c) Unallowed loss	
						1.00			
Part VIII Allowed Losses. See inst			1				-		
Name of activity	Form or sche and line nur to be reporte (see instruct	nber ed on	(a) l	i) Loss (b) Unall		nallowed loss	oss (c) Allowed los		
Total									

REV 03/07/24 PRO

Form **8582** (2023)