## **IRS e-file Signature Authorization**

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service

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 nur	nber
SHI	VA KUMARREDDY CHAMAKURA	056-29-37	57
Spouse	s's name	Spouse's social se	curity number
Par	<b>Tax Return Information – Tax Year Ending December 31,</b> 2023 (Enter	er year you are a	uthorizina)
	whole dollars only on lines 1 through 5.	, you you are a	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1	Adjusted gross income	1	93,626.
2	Total tax	2	12,853.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	17,397.
4	Amount you want refunded to you	4	4,544.
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 LLC	to enter or generate my PIN

9	3	7	5	7	as my
			gits, all ze		asiny

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 Method Returns Only—continue below					
Part III Certification and Authentication – Practiti	oner PIN Method Only				
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your fiv	e-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1				

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 🕨	Da	ate 🕨
	ons ed To Do So	
For Denerwork Deduction Act Nation and Ve		(22/24 PPO Earm 8870 (Pay 01 2021)

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

<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Tax</b>		turn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	ple in tr	nis space.
For the year Jar	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See sep	barate	nstruc	ctions.
Your first name	and m	iddle initial	Last r	name							Your so	cial sec	urity n	umber
SHIVA KU	JMARI	REDDY	CHA	MAKURA	4						056	29	375	57
		s first name and middle initial	Last r		-									ity number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.		Presider	ntial Ele	ection	Campaign
		CRES DR						3	2		Check h		'	,
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP co	ode		•	•		, want \$3 ecking a
FAIRFAX						VZ	4	220	30		box belo			•
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal c	ode	your tax	_	_	<b>-</b> -
												∐ Yo	u [	Spouse
Filing Status	; 🗵	Single					Head of he	ouseh	old (HOF	I)				
Check only		Married filing jointly (even if only or	ne hao	d income)										
one box.		Married filing separately (MFS)							÷ .		,			
		you checked the MFS box, enter the			pouse. If you	u che	ecked the HOH	l or QS	SS box, e	enter	the chi	ld's na	me if t	the
	qu	alifying person is a child but not you	ir aep	endent:										
Digital	At ar	ny time during 2023, did you: (a) rece	eive (a	is a rewar	d, award, or	payr	ment for prope	rty or :	services)	; or (	b) sell,			
Assets	exch	hange, or otherwise dispose of a digi	tal as	set (or a fi	nancial inter	est ir	n a digital asse	t)? (Se	e instruc	ction	s.)	□ Ye	es 🛛	⊠ No
Standard	Som	neone can claim: 🗌 You as a de	pende	ent 🗌	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate return	n or yo	ou were a	dual-status	alien	ו							
Age/Blindness	S You	: Were born before January 2, 1	959	🗌 Are b	lind Spo	ouse	: 🗌 Was bor	n befc	ore Janua	ary 2,	1959		s blind	ł
Dependents	s (see	instructions):		(2)	Social security	,	(3) Relationsh	in <b>(4</b>	) Check th	ne bo	x if qualif	ies for (	see ins	structions):
If more		irst name Last name		(_)	number		to you		Child ta	ax cre	dit	Credit fo	r other	dependents
than four									[					
dependents, see instructions														
and check	s								[					
here														
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	see instruc	ctions) .						1a		113	,949.
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2.				• •		1b	_		
W-2 here. Also	С	Tip income not reported on line 1a	•		•					· ·	1c			
attach Forms W-2G and	d		Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d	_			
1099-R if tax	e	Taxable dependent care benefits f						• •		• •	1e			
was withheld.	f	Employer-provided adoption bene						• •	• •		1f	-		
lf you did not get a Form	g	Wages from Form 8919, line 6 .						• •	• •	• •	1g			0.
W-2, see	h i	Other earned income (see instructi Nontaxable combat pay election (s	,			• •	· · · · ·	···	• •	• •	1h			0.
instructions.	z	Add lines 1a through 1h		structions		• •	11				1z	1	113	,949.
Attach Sch. B	 2a	Ŭ I	2a		· · · ·	 ьт	axable interest	· ·		• •	2b	+		4.
if required.	-4 3a		3a		116.		Ordinary divider				3b			116.
	4a		4a				axable amount				4b			
Standard Deduction for –	5a		5a				axable amount				5b			
Single or	6a	Social security benefits	6a				axable amount				6b			
Married filing separately,	с	If you elect to use the lump-sum elect	lectior	n method,	check here	(see	instructions)			. 🗆	]			
\$13,850	7	Capital gain or (loss). Attach Schee	dule D	if require	d. If not requ	uired	, check here			. 🗆	] 7			-775.
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule	1, line	10							8		-19	,668.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8	3. This is y	our <b>total in</b> d	com	e				9		93	,626.
\$27,700 • Head of	10	Adjustments to income from Sche	dule 1	, line 26							10			
household,	11	Subtract line 10 from line 9. This is	s your	adjusted	gross incor	ne					11		93	,626.
<ul> <li>\$20,800</li> <li>If you checked I</li> </ul>	12	Standard deduction or itemized									12	_	13	,850.
any box under Standard	13	Qualified business income deducti	ion fro	m Form 8	995 or Form	899	95-A				13	_		
Deduction,	14		• •								14			,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	our	taxable incom	е.			15		79	,776.

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

Form **1040** (2023)

Form 1040 (2023	3)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any f	rom Form	n(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3 🗌	1	6	12,853.
Credits	17	Amount from Schedule 2, line 3					1	7	
	18	Add lines 16 and 17					1	8	12,853.
	19	Child tax credit or credit for other d	ependen	ts from Sched	ule 8812		1	9	
	20	Amount from Schedule 3, line 8					2	0	
	21	Add lines 19 and 20					2	1	
	22	Subtract line 21 from line 18. If zero	o or less,	enter -0			2	2	12,853.
	23	Other taxes, including self-employn	nent tax,	from Schedule	e 2, line 21 .		2	3	0.
	24	Add lines 22 and 23. This is your to	tal tax				2	4	12,853.
Payments	25	Federal income tax withheld from:							
-	а	Form(s) W-2				<b>25a</b> 17	,397.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions) .				25c			
	d	Add lines 25a through 25c					25	5d	17,397.
If you have a	26	2023 estimated tax payments and a	amount a	pplied from 20	22 return		2	6	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No	27			
attach Sch. ElC.	28	Additional child tax credit from Sche	dule 8812	2		28			
	29	American opportunity credit from F	orm 8863	3, line 8		29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line 15				31			
	32	Add lines 27, 28, 29, and 31. These	are your	total other pa	ayments and refu	undable credits	3	2	
	33	Add lines 25d, 26, and 32. These a	re your <b>to</b>	otal payments			3	3	17,397.
Refund	34	If line 33 is more than line 24, subtr	act line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>	3	4	4,544.
	35a	Amount of line 34 you want refund			is attached, che	ck here	. 🗌 🛛	5a	4,544.
Direct deposit?	b	Routing number 1 0 1 1 0				Checking	Savings		
See instructions.	d	Account number 5 1 8 0 0 9 9 8 0 7 2 3							
	36	Amount of line 34 you want applied	l to your	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24. This is							
You Owe		For details on how to pay, go to we	vw.irs.go	v/Payments or	see instructions		3	7	
	38	Estimated tax penalty (see instructi	ons) .			38			
Third Party	Do	you want to allow another perso	n to dise	cuss this retu	rn with the IRS?	See		_	_
Designee	ins	tructions					omplete belo		< No
	De nai	signee's		Phone no.			onal identificati per (PIN)	on	
Cian		der penalties of perjury, I declare that I hav	e examine		accompanying sche		. ,	est of m	w knowledge and
Sign		ef, they are true, correct, and complete. D							
Here	Yo	ur signature		Date	Your occupation		If the IRS	sent y	ou an Identity
		C .							enter it here
Joint return?					SOFTWARE I		(see inst.	,	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>both</b> mu	st sign.	Date	Spouse's occupat	ion			our spouse an on PIN, enter it here
your records.							(see inst.		in Fin, enter it here
	Ph	one no. (316)469-8679		Email address	Спумукцрусці	IVA97@GMAIL.CC	)M		
		(0=0)=00.00	er's signat	1	CITAMAKOKABUI	Date	PTIN	Cr	neck if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM	0				P0208270		Self-employed
Preparer		n's name GLOBAL TAXES I		TADAG PREAM	COLIA IAUDAM	05/01/2024			8)965-9522
Use Only		n's address 245 ROONEY CT		INSWICK N	J 08816		Firm's El		87905-9522 84-3171965
Go to www.irc.cr		1040 for instructions and the latest inform		TIONICIC IN				<u> </u>	Form <b>1040</b> (2023)
GO 10 W WW.115.90	5V/1 0/1		auon.		BAA	REV 02/23/24 PRO			1 JIII 1 JTU (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. <b>01</b>
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
SHIVA KUMARRED	DY CHAMAKURA	056-29	-3757

Par	t Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes			1	0.
2a	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C			3	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach S	Schedule E .	5	-19,671.
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	<b>8i</b>			
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		1		
	1040, line 1a or 1d	8s	(	<u> </u>	
t	Pension or annuity from a nonqualifed deferred compensation plan or				
	a nongovernmental section 457 plan	8t			
	Wages earned while incarcerated	8u			
Z			_		
-	See Stmt 3.	8z	3.		-
9	Total other income. Add lines 8a through 8z			9	3.
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente	r here	e and on Form		10 660
	1040, 1040-SR, or 1040-NR, line 8			10	-19,668.
FOL Pa	perwork Reduction Act Notice, see your tax return instructions.			Schedul	e 1 (Form 1040) 2023

F otice, see your ta ipe retu istructio

Schedule 1 (Form 1040) 2023

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-	basis	aovernmen	t 🗌	
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a				19a	
b	Recipient's SSN				
c	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction				
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:	· · ·			
 a		24a			
	Deductible expenses related to income reported on line 8I from the	<u>- 10</u>			
<b>D</b>		24b			
с	Nontaxable amount of the value of Olympic and Paralympic medals				
Ŭ		24c			
d		24d			
e	Repayment of supplemental unemployment benefits under the Trade				
C		24e			
f		24f		_	
g		24g		_	
•	Attorney fees and court costs for actions involving certain unlawful	<u></u>		-	
		24h			
		2411		-	
	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect				
		24i			
:		24i 24i			
ן ע	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	<b>2</b> 7			
ĸ		24k			
-	Other adjustments. List type and amount:	248		-	
2		24z			
9E	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> .	 Entor			
20	Form 1040, 1040-SR, or 1040-NR, line 10			26	
	BAA	REV 02/2		-	e 1 (Form 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.

Attachment Sequence No. 12 Your social security number

20

Internal Revenue Service Name(s) shown on return

Department of the Treasury

SHIVA KUMARREDDY CHAMAKURA

056-29-3757

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

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

lines	instructions for how to figure the amounts to enter on the below.	<b>(d)</b> Proceeds	<b>(e)</b> Cost	<b>(g)</b> Adjustments to gain or loss from		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, Part I, line 2, column (g)		combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	494.	1,104.			-610.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked	597.	803.			-206.
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1			usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions		-	-	6	( )
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-816.

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

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)		(h) Gain or (loss) Subtract column (e) 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.				(9)	
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked	41.	0.			41.
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824			. ,	11	
12	Net long-term gain or (loss) from partnerships, S corporat			. ,	12 13	
13 14	Capital gain distributions. See the instructions Long-term capital loss carryover. Enter the amount, if any				13	
17	Worksheet in the instructions	-	14	( )		
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•			15	41.

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	<b>16</b> –775.
	• If line 16 is a <b>gain</b> , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is <b>zero</b> , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 <b>both</b> gains?	
	<b>No.</b> Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	<ul> <li>Are lines 18 and 19 both zero or blank and you are not filing Form 4952?</li> <li>Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.</li> </ul>	
	☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or     (\$3,000), or if married filing separately, (\$1,500)	<b>21</b> ( 775.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

BAA REV 02/23/24 PRO

Schedule D (Form 1040) 2023

8949

#### Department of the Treasury Internal Revenue Service

# 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.

Name(s) shown on return	Social security number or taxpayer identification number
SHIVA KUMARREDDY CHAMAKURA	056-29-3757

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.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

C) Short-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis See the <b>Note</b> below	If you enter an a enter a co	any, to gain or loss amount in column (g), ode in column (f). arate instructions.	<b>(h)</b> Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	05/17/23	12/31/23	494.	1,104.			-610.
<b>2 Totals.</b> Add the amounts in column	(d) (e) (d) and	h (h) (subtract					
2 Totals, Add the amounts in column negative amounts). Enter each to Schedule D, line 1b (if Box A abov above is checked), or line 3 (if Box	al here and inc e is checked), <b>li</b>	lude on your 1e 2 (if Box B	494.	1,104.			-610.

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

Form 8949 (2023)	Attachment Sequence No. 12A	Page <b>2</b>

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SHIVA KUMARREDDY CHAMAKURA

Social security number or taxpayer identification number 056-29-3757

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)

- X (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property (Example: 100 sh. XYZ Co.)	<b>(b)</b> Date acquired (Mo., day, yr.)	(c) Date sold or disposed of	(d)     Cost or other basis       old or     Proceeds       ed of     (sales price)   and see Column (e)		t)         Cost or other basis         enter a code           eeds         See the Note below         See the separat           price)         and see Column (e)         (b)		(h) Gain or (loss) Subtract column (e) from column (d) and	
		(Mo., day, yr.)	(see instructions)	in the separate instructions.	(f) (g) Code(s) from instructions adjustment		combine the result with column (g).	
Robinhood Crypto LLC	10/02/22	12/31/23	41.	0.			41.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	I here and inc is checked), <b>lir</b>	lude on your 1e 9 (if Box E	41.	0.			41.	

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

REV 02/23/24 PRO

Form **8949** 

#### Department of the Treasury Internal Revenue Service

# 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.



Name(s) shown on returnSocial security number or taxpayer identification numberSHIVA KUMARREDDY CHAMAKURA056-29-3757

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.

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

X (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

C) Short-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property	(b) (c) Date sold or		<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> below		<b>(h)</b> <b>Gain or (loss)</b> Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Crypto LLC	05/17/23	12/31/23	597.	803.			-206.
2 Totals. Add the amounts in columnegative amounts). Enter each to Schedule D, line 1b (if Box A abovabove is checked), or line 3 (if Box	otal here and inc ve is checked), <b>li</b>	lude on your ne 2 (if Box B	597.	803.			-206.

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

						I Income and Loss						OMB No. 1545-0074		
(Form 1040) (From rental real estate, royalties, partne						corporati	Cs, etc.)	2023						
	nent of the Treasury								formation		Attachn	nent	10	
	Internal Revenue Service         Go to www.irs.gov/ScheduleE for instructions and the latest information.           Name(s) shown on return         Your social           SHIVA KUMARREDDY CHAMAKURA         056-29											ice No.		
. ,		DV CU	λΜλγιτρλ								9-3757		ſ	
Part			ss From Rental Real E	istato an	d Por	valties				050-2	9-3/3/			
Fart	Note: If vo	ou are in	the business of renting persons from Form 4835 on page	onal proper			<b>C</b> . See	instru	ctions. If you a	are an indiv	vidual, rep	ort farn	n	
Α			ents in 2023 that would re		to file	Form(s) 1	099? S	see ins	structions .		. 🗌 Ye	s X	No	
B	f "Yes," did you	or will	you file required Form(s) <sup>-</sup>	1099? .							. 🗌 Ye	es 🗌	No	
1a			each property (street, city											
Α	MNR ELITE	APT,	4TH FLOOR402 KUSH	AIGUDA,	ECII	_ HYDER	ABAD	, TEL	ANGANA IN	1 50000	52			
B		,		,										
C														
1b	Type of Prope	rty 2	For each rental real est	tate prope	rtv list	ed		Fa	ir Rental	Person	al Use	_		
	(from list below		above, report the num	ber of fair r	rental	and			Days	Da		Q	JV	
Α	3		personal use days. Che				Α		365		0	Γ		
В			if you meet the require qualified joint venture.				В							
С				See instru	Clions	».	С							
Туре	of Property:													
1	Single Family R	esiden	ce 3 Vacation/Short-	Term Rent	al	5 Land			Self-Rental					
2	Multi-Family Re	sidenc	e 4 Commercial			6 Roya	lties	8	Other (desci	ribe)				
									Properti	es:				
Incom	ne:						Α		B			С		
3	Rents received	1			3		6	20.						
4					4									
Exper														
5	Advertising				5									
6	Auto and trave	el (see in	nstructions)		6		2	50.						
7	Cleaning and r	mainter	ance		7		1,9	14.						
8	Commissions				8									
9	Insurance .				9									
10	-		ssional fees		10									
11	-				11		1,6	30.						
12			d to banks, etc. (see instr	,	12									
13	Other interest				13									
14					14		5,2							
15					15		5,5	13.						
16					16			~~						
17			or depletion		17		5,7	20.						
18 19	Other (list)	•			18 19									
20	· · ·	e Add	ines 5 through 19		20		20,2	01						
21			line 3 (rents) and/or 4 (roy		20		20,2	<u>, , , , , , , , , , , , , , , , , , , </u>						
21			nstructions to find out if y											
					21	-	-19,6	71.						
22	Deductible rer	ntal real	estate loss after limitatio	n. if anv.										
			structions)		22	(	19,67	1.)	(	)	(			
23a	Total of all am	ounts re	eported on line 3 for all re	ntal prope	rties			23a	- -	620.				
b			eported on line 4 for all ro					23b						
С			eported on line 12 for all p					23c						
d	Total of all am	ounts re	eported on line 18 for all p	properties				23d						
е			eported on line 20 for all p	-				23e	20	,291.				
24			amounts shown on line 2			-				. 24				
25			sses from line 21 and renta								(	19,6	71.	
26			ate and royalty income of											
	here. If Parts I	I, III, ar	nd IV, and line 40 on pag	e 2 do not	t appl	y to you,	also e	nter th	nis amount c	n				

For Paperwork Reduction Act Notice, see the separate instructions.	
For Faperwork neurcion Act Notice, see the separate instructions.	

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

26

-19,671.

NPA

**Continuation Statement** 

## Additional Information From 2023 Federal Tax Return

# Schedule 1: Additional Income and Adjustments to Income Other Income

Description	Amount
Substitute Payment from 1099-Misc	2.
Other Income from box 3 of 1099-Misc	1.
Total	3.