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

	5					
Submi	ssion Identification Number (SID)					
Taxpaye	r's name	Social securi	ty numl	per		
AKHI	L VARMA PENUMATCHA	889-81	-417	2		
Spouse's	s name	Spouse's soo	ouse's social security number			
Dort	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	NOOT VOLL O	ro ou	thorizina	<u> </u>	
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enterwhole dollars only on lines 1 through 5.	year you a	re au	monzing.)	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1	l 65	,191.	
2	Total tax		2		,599.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,395.	
4	Amount you want refunded to you		4		,796.	
	Amount you owe		5	_	<i>,</i> 130.	
Part		еер а сор	y of y	our retu	rn)	
my knoreturn (control to send for any Agent to paymer authorize paymer business taxes to personal	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) wiedge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transm my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejecteday in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U or initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate att, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised also appropriate to the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment information necessary to answer inquiries and resolve issues related to the particle Funds Withdrawal Consent.	e are the am tter, or electro- ction of the to S. Treasury a cated in the to the authorizatests must be processing of ayment. I fur	ounts formic references on the control of the contr	from the inc turn original ssion, (b) th designated paration sof to this acco To revoke (in ved no late ectronic pa	come tax tor (ERO) ne reason Financial tware for bunt. This cancel) a er than 2 syment of that the	
	yer's PIN: check one box only					
X	•	mv PIN	1-1-	1 7 2	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	,	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Your s	gnature ▶ Date ▶					
Snous	e's PIN: check one box only					
	I authorize to enter or generate	my PIN			as my	
	ERO firm name	_	ter five	digits, but	aomy	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part I	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 Don't ent	6 0	8 2 7	1	
		Don t ent	∪ı aıı ∠t	03		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taked to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Ir	itting this retu	urn in a	accordance		
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To I	o So				

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



£1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		urn	202	3	OMB No. 1545-0	0074	IRS Use Only	∕—Do not v	write or staple in	this space.
For the year Ja	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	eparate instru	uctions.
Your first name	e and m	iddle initial	Last na	ame						Your so	ocial security	number
AKHIL V	ARMA		PENU	JMATCH	ΗA					889	81 41	72
		s first name and middle initial	Last na								's social secu	
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.				Δ	pt. no.	Preside	ential Election	. Campaigr
1125 RU	SKWA	Y								Check	here if you, o	r your
		ce. If you have a foreign address, also co	mplete s	spaces be	elow.	Sta	ite	ZIP co	ode		e if filing jointly	
LEWISVI	LLE					TΣ	ζ	750	77		o this fund. Cl low will not cl	•
Foreign countr				Foreign p	rovince/state/o	count			n postal code		x or refund.	larige
											You	Spouse
Filing Status	s 🗵	Single					Head of ho	useh	old (HOH)	•		
Check only		Married filing jointly (even if only o	ne had	income)								
one box.		Married filing separately (MFS)					☐ Qualifying s	surviv	ing spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name o	of your s	pouse. If you	che	ecked the HOH	or Q	SS box, ente	er the ch	ild's name if	the
	qu	alifying person is a child but not you	ır depei	ndent:								
Digital	Δt 21	ny time during 2023, did you: (a) rec	oivo (ac	a rewar	d award or i	navr	ment for propert	vor	services): or	(h) call		
Digital Assets		nange, or otherwise dispose of a dig						-	,	. ,		⊠ No
Standard		neone can claim: You as a de					a dependent	, (01		,		
Deduction		Spouse itemizes on a separate retur	•		•		•					
		<u> </u>										
	-	: Were born before January 2, 1	959	Are b	lind Spo	use	: 🔝 Was born		re January 2		☐ Is blin	
Dependent	s (see instructions):			(2) Social security			(3) Relationship		(4) Check the box if o		1	
If more	(1) 1	(1) First name Last name		number			to you	_	Child tax c	reall	Credit for othe	1 dependent
than four dependents,								_]
see instruction	ıs						-]
and check	₁ —										 	<u>]</u>
here L	4.	Total amount from Farm(a) M. O. b.	ov 1 /oc	l inates	ationa)					1.		1 060
Income	1a	Total amount from Form(s) W-2, b	•		,							1,060.
Attach Form(s)		Household employee wages not re			. ,							
W-2 here. Also attach Forms	C C	Tip income not reported on line 1a			,					. 10		
W-2G and	d		Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
1099-R if tax was withheld.	e f	Taxable dependent care benefits from Form 2441, line 26							. 16			
If you did not	'	Wagaa from Form 2010 line 6			·					. 10		
get a Form	g h	,				•				· '\		0.
W-2, see instructions.	i	Other earned income (see instructions)										
แเอแนบแบบไว้.	z	Add lines 1a through 1h	JOU 1113L	. 40110113)	,	•		1		. 12	, 81	1,060.
Attach Sch. B	<u>-</u> _		2a		· · i ·	b Т	axable interest			. 2k		1.
if required.	3a	. –	3a				Ordinary dividend	ds				
	 4a	_	4a				axable amount					
Standard	5a	_	5a				axable amount					
• Single or	6a	_	6a				axable amount			. 6k		
Married filing separately,	С	If you elect to use the lump-sum e	lection	method.					[
\$13,850	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						7	·	1,489.		
 Married filing jointly or 	8							. 8	_	4,381.		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							. 9		5 , 191.	
\$27,700	10	Adjustments to income from Sche		•						. 10		
 Head of household, 	11	Subtract line 10 from line 9. This is								. 11	1 65	5,191.
\$20,800	12	Standard deduction or itemized	-							. 12		3,850.
If you checked any box under	13	Qualified business income deduct		`		,	лб-А			. 13		
Standard Deduction,	14									. 14		3,850.
see instructions.	15	Subtract line 1/1 from line 11. If zer	n or les	o ontor	O This is w	our t	tavabla income			15		

Form 1040 (2023	3)								Page Z
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	6,599.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	6,599.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0				22	6,599.
	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	6,599.
Payments	25	Federal income tax withheld	I from:						
	а	Form(s) W-2							
	b	Form(s) 1099							
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	11,395.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20)22 return			26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27			
allacii Scii. ElC.	28	Additional child tax credit from	m Schedule 8812	2		28			
	29	9 American opportunity credit from Form 8863, line 8							
	30	0 Reserved for future use							
	31	Amount from Schedule 3, lin							
	32	Add lines 27, 28, 29, and 31	32						
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	11,395.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amoun	t you overpaid		34	4,796.
	35a								4,796.
Direct deposit?	b	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
See instructions.	d	Account number 5 9 1 8 2 2 3 5 5							
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	
	38	Estimated tax penalty (see in	_	-		38			
Third Party	Do	you want to allow another				See			
Designee		,	•				omplete	below.	⋈ No
J		esignee's		Phone		onal ident	ification		
	name no. number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to								
Sign		ider penalties of perjury, I declare t lief, they are true, correct, and com							
Here					, , , I				nt you an Identity
	YO	ur signature		Date Your occupation					nt you an identity 'IN, enter it here
Joint return?				SOFTWARE D		inst.)	,		
See instructions.		ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupation			nt your spouse an	
Keep a copy for your records.			lo (s					ection PIN, enter it here	
	Ph	one no. (210) 396-282	5	Email address	AKHILPVZM@	GMAIL.COM			
Poid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/16/2024	P0208	2703	Self-employed
Preparer	Firm's name GLOBAL TAXES LLC P						Pho	ne no.	(678) 965-9522
Use Only								n's EIN	84-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

AKHIL VARMA PENUMATCHA

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

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

889-81-4172

Taxable refunds, credits, or offsets of state and local income taxes Alimony received			1	
Alimany regained			1	
			2a	
Date of original divorce or separation agreement (see instructions):				
Business income or (loss). Attach Schedule C			3	
			4	
			5	-14,381
Farm income or (loss). Attach Schedule F			6	
Unemployment compensation			7	
Other income:				
Net operating loss	8a ()	
Gambling	8b			
Cancellation of debt	8c			
Foreign earned income exclusion from Form 2555	8d ()	
Income from Form 8853	8e			
Income from Form 8889	8f			
Alaska Permanent Fund dividends	8g			
Jury duty pay	8h			
	8i			
	8j			
Stock options	8k			
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			
	8m			
,	8n			
	80			
	8p			
	8r			
	8s ()	
	,			
	8t			
	-			
Other income. List type and amount:				
	8z			
			9	
	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att. Farm income or (loss). Attach Schedule F. Unemployment compensation Other income: Net operating loss Gambling Cancellation of debt Foreign earned income exclusion from Form 2555 Income from Form 8853 Income from Form 8889 Alaska Permanent Fund dividends Jury duty pay Prizes and awards Activity not engaged in for profit income Stock options 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 Olympic and Paralympic medals and USOC prize money (see instructions) Section 951(a) inclusion (see instructions) Section 951(a) inclusion (see instructions) Section 461(l) excess business loss adjustment Taxable distributions from an ABLE account (see instructions) Scholarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan Wages earned while incarcerated Other income. List type and amount: Total other income. Add lines 8a through 8z Combine lines 1 through 7 and 9. This is your additional income. Ente	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Sci Farm income or (loss). Attach Schedule F. Unemployment compensation Other income: Net operating loss	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Farm income or (loss). Attach Schedule F	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Farm income or (loss). Attach Schedule F Unemployment compensation Other income: Net operating loss Cancellation of debt Foreign earned income exclusion from Form 2555 Bd () Income from Form 8853 Be Income from Form 8889 Alaska Permanent Fund dividends By Jury duty pay Bh Prizes and awards Activity not engaged in for profit income Stock options 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 Olympic and Paralympic medals and USOC prize money (see instructions) Section 951(a) inclusion from an ABLE account (see instructions) Scholarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan Wages earned while incarcerated Other income. List type and amount: 5 6 6 7 7 6 8 6 7 7 7 8 8 7 8 8 7 8 8 8 8

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis g			
	officials. Attach Form 2106	í	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)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
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)			
İ	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:			
0E	Total other adjustments. Add lines 24s through 24z		OF	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter he Form 1040, 1040-SR, or 1040-NR, line 10	iere and on	26	
			20	

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

Capital Gains and Losses

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

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

OMB No. 1545-0074

2023

Attachment Sequence No. **12**

Name(s) shown on return Your social security number 889-81-4172 AKHIL VARMA PENUMATCHA 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. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) 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 (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (g) line 2. 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 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 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 7 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 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 (or other basis) Form(s) 8949, Part II, (sales price) 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 2,109. 620. -1,489.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

-1,489.

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -1,489.• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. ☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 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 1,489.) • (\$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.

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

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side AKHIL VARMA PENUMATCHA

Social security number or taxpayer identification number 889-81-4172

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.

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

_ , ,							(h) Gain or (loss) Subtract column		
(Example: 100 sh. XYZ Co.)	Date acquired (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) a combine the rest with column (g)		
Robinhood Securities LLC	01/01/23	12/31/23	620.	2,109.			-1,489		

Robinhood Securities LLC	01/01/23	12/31/23	620.	2,109.		-1,489.
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 ne 9 (if Box E	620.	2,109.		-1,489.

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,

Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number AKHIL VARMA PENUMATCHA 889-81-4172 Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions 1a Physical address of each property (street, city, state, ZIP code) PLOT NO 28, SAI BABA NAGAR VIZIANAGARAM ANDHRA PRADESH IN 535003 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 648. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 2,165. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 2,231. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 2,733. 14 Repairs 2,890. 15 Supplies 15 16 16 Taxes 17 Utilities 17 2,518. 18 2,492. 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 15,029. 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 -14,381. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 14,381.) 648. Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c $2,\overline{492}$. 23d Total of all amounts reported on line 18 for all properties 23e 15,029. Total of all amounts reported on line 20 for all properties 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 14,381. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

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

-14,381.