# **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)

T.....

Taxpayer's	name	Social secur	ity numb	ber
NITIS	H REDDY PATHIREDDY	857-24	-6393	3
Spouse's n	ame	Spouse's so	cial secu	urity number
Part I	Tax Return Information – Tax Year Ending December 31, 2023 (Enternation	er year you a	are aut	thorizing.)
Enter wh	ole dollars only on lines 1 through 5.			
Note: Fo	rm 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
<b>1</b> A	djusted gross income		1	128,483.
<b>2</b> To	otal tax		2	20,912.
<b>3</b> Fe	ederal income tax withheld from Form(s) W-2 and Form(s) 1099		3	27,357.
<b>4</b> A	mount you want refunded to you		4	6,445.
5 A	mount 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 F	ΡIΝ

4	6	3	9	3	as				
Enter five digits, but don't enter all zeros									

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 si	gnature 🕨 🛛 Da	ate 🕨	•				 				
	Practitioner PIN Method Returns Only—continue	bel	ow								
Part III	Certification and Authentication – Practitioner PIN Method Only										
ERO's EFIN	J/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2	 _	6 nter a	 	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 🕨			
Do	ERO Must Retain This F n't Submit This Form to the		
For Denemicarly Deduction Act Natio		 DEV/ 02/40/24 DDO	Earm 8879 (Bay 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	y−Do not v	vrite or sta	aple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, enc	ling			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number
NITISH F	REDD	Y	PAT	HIREDI	ΟY					857	24	6393
-		s first name and middle initial	Last r									l security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	vpt. no.	Preside	ential Ele	ection Campaigr
8077 165												vou, or your
City, town, or p	ost offi	ice. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode		0	jointly, want \$3 nd. Checking a
REDMOND						WZ		980		box bel	ow will	not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your ta:	_	_
		<u> </u>									∐ Yo	ou Spouse
Filing Status	; []	Single		. :			Head of he	ouseh	old (HOH)			
Check only		Married filing jointly (even if only or Married filing concretely (MES)	ne nac	i income)				ouni	ing spouse	(000)		
one box.	L If y	Married filing separately (MFS) you checked the MFS box, enter the	namo	of your s	nouse If you	ı cha	, ,		• •	. ,	ild'e na	me if the
		alifying person is a child but not you									110 5 110	
			-									
Digital		ny time during 2023, did you: (a) rece	•				• •		,	( )		es 🛛 No
Assets		hange, or otherwise dispose of a diginetic adigination of a diginetic additional additiona Additional additional additional additional additional additional additional additional additional additional a					a dependent	i) / (36		115.)		
Standard Deduction	_	Spouse itemizes on a separate return	•		-							
				_						0 4050		
		Were born before January 2, 1	959	Are b		ouse		14	ore January			s blind
Dependents		instructions):		(2) 5	Social security number	/	(3) Relationsh to you	ip (4	Child tax c			(see instructions): or other dependents
lf more than four	(1)											
dependents,	-											
see instructions	s —											
and check here												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	ee instruc	ctions) .					. 1a		143,285.
	b	Household employee wages not re	eporte	d on Form	n(s) W-2.					. 1b	)	
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	(see i	nstructior	ns)					. 10	;	
attach Forms W-2G and	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see i	nstru	uctions)			. 10	1	
1099-R if tax	е	Taxable dependent care benefits f	rom Fo	orm 2441,	, line 26					. 1e	•	
was withheld.	f	Employer-provided adoption bene						• •		. <u>1</u> f	:	
lf you did not get a Form	g	Wages from Form 8919, line 6 .						• •		. <u>1</u> g		
W-2, see	h	Other earned income (see instructi		· · ·				· ·		. <u>1</u> h	1	0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)	)		<b>1</b> i			-		143,285.
	z 2a	Add lines 1a through 1h Tax-exempt interest	2a		· · ·	 ьт	axable interest	· ·		. 1z . 2b		143,205.
Attach Sch. B if required.	2a 3a		2a 3a				Ordinary divider			. 20. . 3b		
	 4a	-	4a				axable amount			. 4b		
Standard	5a		5a				axable amoun			. 5b		
<ul> <li>Deduction for —</li> <li>Single or</li> </ul>	6a		6a				axable amoun			. 6b		
Married filing separately,	c	If you elect to use the lump-sum elect		method.	check here				[			
\$13,850	7	Capital gain or (loss). Attach Sched				•	,		[	7		3,788.
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule								. 8		-18,590.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,								. 9		128,483.
\$27,700	10	Adjustments to income from Sche	dule 1	, line 26						. 10		
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is	your	adjusted	gross incor	ne				. 11		128,483.
\$20,800 • If you checked r	12	Standard deduction or itemized	deduc	<b>tions</b> (fro	m Schedule	A)				. 12	2	13,850.
any box under Standard	13	Qualified business income deducti	ion fro	m Form 8	995 or Form	899	5-A			. 13	8	
Deduction,	14									. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	ourt	taxable incom	ie .		. 15	5	114,633.

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 from Forr	m(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3 🗌	[	16	20,912.
Credits	17	Amount from Schedule 2, line 3				[	17	
	18	Add lines 16 and 17				[	18	20,912.
	19	Child tax credit or credit for other dependent	nts from Sched	ule 8812		[	19	
	20	Amount from Schedule 3, line 8					20	
	21	Add lines 19 and 20				[	21	
	22	Subtract line 21 from line 18. If zero or less	, enter -0			[	22	20,912.
	23	Other taxes, including self-employment tax	, from Schedule	e 2, line 21 .		[	23	0.
	24	Add lines 22 and 23. This is your total tax				[	24	20,912.
Payments	25	Federal income tax withheld from:						
•	а	Form(s) W-2			<b>25a</b> 27	,357.		
	b	Form(s) 1099			25b			
	с	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	27,357.
If you have a	26	2023 estimated tax payments and amount	applied from 20	)22 return		[	26	
qualifying child,	27	Earned income credit (EIC)		No .	27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 881	2		28			
	29	American opportunity credit from Form 886	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 you	r total other p	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. These are your t	otal payments	• • • • •		[	33	27,357.
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33	. This is the amou	nt you <b>overpaid</b>		34	б,445.
	35a	Amount of line 34 you want refunded to yo	<b>u</b> . If Form 8888	3 is attached, che	ck here	. 🗆 [	35a	б,445.
Direct deposit?	b	Routing number 0 7 1 0 0 0 0	1 3	c Type: 🛛 🗙	Checking	Savings		
See instructions.	d	Account number 7 3 1 6 9 3 7	6 5					
	36	Amount of line 34 you want applied to you	r 2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the arr	nount you owe					
You Owe		For details on how to pay, go to www.irs.go	ov/Payments or	see instructions			37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party	Do	you want to allow another person to dis	scuss this retu	rn with the IRS?	' See			
Designee	ins	structions			🗌 <b>Yes.</b> Co	omplete be	low.	🗙 No
		signee's	Phone			onal identific	ation	
<u>.</u>	na	der penalties of perjury, I declare that I have examine	no.			per (PIN)	boot (	
Sign		ief, they are true, correct, and complete. Declaration		1 7 0		,		, 0
Here	Yo	ur signature	Date	Your occupation		If the I	RS ser	nt you an Identity
	10	a signature	Duie					N, enter it here
Joint return?				SOFTWARE :	ENGINEER	(see in	st.)	
See instructions.	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat	tion			nt your spouse an
Keep a copy for your records.						Identit (see in	,	ection PIN, enter it here
,						,		
		one no. (305)764-7052 eparer's name Preparer's signa	Email address	NITHISHREDDY	Y0202@GMAIL.CC		T	Check if:
Paid					Date	PTIN		_
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	KAM SAGAR	GUPTA TALLAM	02/25/2024	P02082		Self-employed
Use Only		m's name GLOBAL TAXES LLC		T 00016		Phone		678)965-9522
		m's address 245 ROONEY CT E BR	UNSWICK N			Firm's	EIN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information.		BAA	REV 02/16/24 PRO			Form <b>1040</b> (2023)

SCHEDULE	1
(Form 1040)	

# Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 3

Department of the Treasury Internal Revenue Service		Attachment Sequence No. <b>01</b>	
Name(s) shown on Fo	Your soc	ial security number	
NITISH REDDY P	ATHIREDDY	857-24	-6393

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	ch Schedule E .	5	-18,590.
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		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	<u>8i</u>	_	
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			
		8m	_	
	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 8r	-	
r	Scholarship and fellowship grants not reported on Form W-2	or	-	
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	05 (	4	
L	a nongovernmental section 457 plan	8t		
u	•	8u	-	
z	Other income. List type and amount:	00	-	
2		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-18,590.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedul	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-ba	asis 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:			
а	Jury duty pay (see instructions)	la		
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit	lb		
с	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m	lc		
d	Reforestation amortization and expenses	ld		
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974	le		
f	Contributions to section 501(c)(18)(D) pension plans	4f		
g	Contributions by certain chaplains to section 403(b) plans 24	lg		
ĥ	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	lh 🛛		
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	4i		
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	lk		
z	Other adjustments. List type and amount:			
	24	lz		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. E			
	Form 1040, 1040-SR, or 1040-NR, line 10	<u></u> .	26	
	BAA R	EV 02/16/24 PRO	Schedule 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.

20**23** Attachment Sequence No. **12** 

Internal Revenue Service Name(s) shown on return

Department of the Treasury

NITISH REDDY PATHIREDDY

Your social security number 857-24-6393

REDDY

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 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	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	<b>(g)</b> Adjustments to gain or loss fro Form(s) 8949, Pa		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
whol	e dollars.			line 2, column (	g)	with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	28,067.	24,280.			3,787.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
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	3,787.

#### 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 e dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, l line 2, colum	from Part II,	(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.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked	7.	б.			1.
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
11 12	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
13					13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions		-	-	14	( )
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	-			15	1.

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	<b>16</b> 3,788.
	• 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? X <b>Yes.</b> Go to line 18.	
	<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)	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 02/16/24 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
NITISH REDDY PATHIREDDY	857-24-6393

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 enter a co	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).
FIDELITY	01/01/23	12/31/23	1,339.	1,339.			0.
ROBINHOOD SECURITY LLC	01/01/23	12/31/23	26,728.	22,941.			3,787.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), <b>lir</b>	lude on your 1e 2 (if Box B	28,067.	24,280.			3,787.

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 NITISH REDDY PATHIREDDY

Social security number or taxpayer identification number 857-24-6393

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

<b>1</b> (a) Description of property (Example: 100 sh. XYZ Co.)	<b>(b)</b> Date acquired (Mo., day, yr.)	<b>(c)</b> Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e) in the separate instructions.	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions. (g) Amount of adjustment	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
ROBINHOOD SECURITY LLC	01/01/21	12/31/23	7.	6.			1.
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	7.	6.			1.

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 02/16/24 PRO

SCHEDULE E (Form 1040) (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)						Calata)	OMB No	. 1545-0074			
•	-	(From r	Attach to Form 1040					Irusis, Reivii	CS, etc.)	20	23
	nent of the Treasury Revenue Service		Go to www.irs.gov/ScheduleE fo					formation.		Attachm Sequence	ent ce No. <b>13</b>
	) shown on return								Your soci	al security r	
NITI	SH REDDY P	ATHIRE	EDDY						857-2	4-6393	
Part	I Income	or Los	s From Rental Real Estate a	nd Ro	yalties				1		
	Note: If yo	ou are in t	he business of renting personal prope s from <b>Form 4835</b> on page 2, line 40.	erty, use	Schedul	e C. See	instru	ctions. If you	are an indi	vidual, repo	ort farm
<b>A</b> [			ents in 2023 that would require you		Form(s)	10002 9	an inc	tructions			s 🕅 No
			ou file required Form(s) 1099?								
 1a			ach property (street, city, state, Z								
	,				-						
	KOTHAPET .	RANGAR	EDDY TELANGANA IN 5000	35							
<u>В</u> С											
 1b	Type of Prope	rty 2	For each rental real estate prop	orty liet	tod		Ea	ir Rental	Porcor	nal Use	
10	(from list below		above, report the number of fair				Га	Days		ays	QJV
Α	3	<u> </u>	personal use days. Check the C	JV bo	x only	Α		365		0	
В			if you meet the requirements to			В					
С			qualified joint venture. See instr	uctions	5.	С					
Туре	of Property:										
	Single Family R			ntal	5 Land	-		Self-Rental			
2	Multi-Family Re	sidence	4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
								Propert	ies:		
Incon	ne:					Α		В			С
3				3		6	00.				
4	Royalties rece	ived		4							
Exper	ises:										
5				5							
6			structions)	6		1 0					
7	-		ance	7		1,7	57.				
8 9				0 9							
9 10			sional fees	10							
11				11		1,2	00.				
12			to banks, etc. (see instructions)	12							
13		•		13							
14	Repairs			14		3,7	74.				
15				15		3,3	68.				
16				16							
17				17		4,2					
18	•	xpense (	or depletion	18		4,8	52.				
19 20	Other (list)		nes 5 through 19			10 1	0.0				
20	•		•	20		19,1	90.				
21			ne 3 (rents) and/or 4 (royalties). If structions to find out if you must								
				21		-18,5	90.				
22			estate loss after limitation, if any, tructions)	22	(	18,59	0.)	(	)	(	
23a		-	ported on line 3 for all rental prop				23a	١	600.		
b			ported on line 4 for all royalty prop				23b				
с			ported on line 12 for all properties				23c				
d	Total of all am	tal of all amounts reported on line 18 for all propertie					23d		1,852.		

. .

. .

23e

. . . . . . .

-18,590.

Total of all amounts reported on line 20 for all properties . .

For Paperwork Reduction Act Notice, see the separate instructions.

**Income.** Add positive amounts shown on line 21. **Do not** include any losses

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 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

е

24

25

26

Schedule E (Form 1040) 2023

18,590.

-18,590.

19,190.

24

25

26

	156	2
Form	400	

## **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No. 1545-0172

-			
	Attach to y	your tax	return.

2023

Department of the Treasury Internal Revenue Service	Go to	Attac www.irs.gov/Form4562	for instructio		st information.		Attachment Sequence No. <b>179</b>			
Name(s) shown on return		Busine	ss or activity to w	hich this form rela	tes		tifying number			
NITISH REDDY PAT	HIREDDY	Sch	E KOTHAP	ET		85	7-24-6393			
Part Election To	Expense Ce	ertain Property Und	der Section	179		1				
		ed property, compl			nplete Part I.					
1 Maximum amount	(see instructior	ns)			· · · · · · · ·	1	1,160,000			
		/ placed in service (se				2				
	Threshold cost of section 179 property before reduction in limitation (see instructions)									
5 Dollar limitation fo	r tax year. Su	btract line 4 from lir	ne 1. If zero	or less, enter	-0 If married filing					
	-				-	5				
<b>6</b> (a) D	escription of prope	rty	(b) Cost (busi	ness use only)	(c) Elected cost					
							]			
							1			
7 Listed property. En	ter the amount	from line 29		7			1			
8 Total elected cost of	of section 179	property. Add amount	ts in column (	c), lines 6 and	7	8				
9 Tentative deduction	n. Enter the sm	naller of line 5 or line 8	3			9				
10 Carryover of disallo	<b>D</b> Carryover of disallowed deduction from line 13 of your 2022 Form 4562									
11 Business income lim	nitation. Enter th	e smaller of business in	ncome (not les	ss than zero) or	line 5. See instructions	11				
12 Section 179 expension	se deduction. /	Add lines 9 and 10, bu	ut don't enter	more than line	11	12				
13 Carryover of disallo	wed deduction	n to 2024. Add lines 9	and 10, less	line 12 .	13					
lote: Don't use Part II o										
Part II Special De	preciation Al	lowance and Othe	r Depreciat	<b>ion (Don't</b> in	clude listed property	. See	instructions.)			
14 Special depreciation	on allowance	for qualified property	/ (other than	listed proper	ty) placed in service					
during the tax year	. See instructio	ons				14				
15 Property subject to	section 168(f)	(1) election				15				
16 Other depreciation						16				
Part III MACRS De	preciation (C	<b>Don't</b> include listed	property. Se	e instruction	s.)					
			Section A							
		aced in service in tax y	-	•		17				
18 If you are electing		-	-	-						
asset accounts, ch										
Section E	1		g 2023 Tax Y	ear Using the	General Depreciation	n Syst	em			
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) 🗆	Depreciation deductio			
<b>19a</b> 3-year property										
<b>b</b> 5-year property										
c 7-year property										
d 10-year property										
e 15-year property										
f 20-year property										
g 25-year property			25 yrs.		S/L					
h Residential rental	01/23	139,221.	27.5 yrs.	MM	S/L		4,852			
property			27.5 yrs.	MM	S/L					
i Nonresidential real	1		39 yrs.	MM	S/L					
property				MM	S/L					
	-Assets Place	ed in Service During	2023 Tax Ye	ar Using the <i>I</i>	Iternative Depreciation	on Sy	stem			
20a Class life					S/L					
<b>b</b> 12-year			12 yrs.		S/L					
<b>c</b> 30-year			30 yrs.	MM	S/L					
d 40-year			40 yrs.	MM	S/L					
Part IV Summary (	See instructio	ons.)								
21 Listed property. En	ter amount fro	m line 28				21				
22 Total. Add amoun			lines 19 and	20 in column	(g), and line 21. Enter					
		of your return. Partne				22	4,852			