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

	3				
Submis	ssion Identification Number (SID)				
Taxpayer	r's name	Social securi	ty numl	per	
TEJA	ASWI REDDY KANDULA	442-29	-080	4	
					r
					,
Part		nter year you a	re au	thorizing	.)
			La	۱ ، ،	010
	te: Whole dollars only on lines 1 through 5. te: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. Adjusted gross income				
			_		
	·		<u> </u>		,829.
Part	Taxpayer Declaration and Signature Authorization (Be sure you get an	nd keep a cop	_	L Our retu	ırn)
return (control to send for any control to send for any control to payment authorize payment business taxes to personal	original or amended) I am now authorizing. I consent to allow my intermediate service provider, training return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account to finy federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to term to the transport of the payment (settlement) date. I also authorize the financial institutions involved in the preceive confidential information necessary to answer inquiries and resolve issues related to the didentification number (PIN) below is my signature for the income tax return (original or amended	nsmitter, or electron rejection of the trace U.S. Treasury and indicated in the trace the trace the authorization to dept the requests must be the processing of the payment. I fur	onic refansmis nd its cax preparation. The receif the elast the action and the receif the action are receif.	turn origina ssion, (b) the designated paration so to this acco To revoke (ved no late ectronic paraken	tor (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the
	•	. 511 9	0 8	8 0 4	
X		ř En			as my
		do	n't ente	er all zeros	
	if you are entering your own PIN and your return is filed using the Practitioner PIN m				
Your si	gnature ► K.TEJASWI Date I	02/16/2024			
Spous	e's PIN: check one box only				
	-	ate my PIN			as my
		En			ao my
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros	
	if you are entering your own PIN and your return is filed using the Practitioner PIN m				
Spouse	e's signature ▶ Date I	•			
	Practitioner PIN Method Returns Only—continue be	low			
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 4 9 Don't ent	6 0	8 2 7	1
		20	20		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual inconted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am something of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers	ubmitting this retu	ırn in a	accordance	
FRO'∘	signature ▶ Date I	•			
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested 1				

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



£1040		artment of the Treasury-Internal Revenue Servi		urn G	20 2	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	ple in this spa	ice.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20		See se	oarate i	nstructions	 s.
Your first name	and m	iddle initial	Last nar	me							Your so	cial sec	urity numbe	 er
TEJASWI	RED:	DY	KAND	ULA							442	29	0804	
		s first name and middle initial	Last nar								Spouse'	s social	security nur	mbei
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				<i>A</i>	Apt. no.		Preside	ntial Ele	ection Camp	aign
8404 WAI	RREN	PARKWAY						1	723		Check h	nere if y	ou, or your	•
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete sp	paces below	1.	Sta	te	ZIP c	ode			•	jointly, want	
FRISCO						TX		750	34		•		nd. Checking not change	_
Foreign countr	y name		F	oreign prov	ince/state/o	count	у	Foreig	ın postal c		your tax		nd.	
Filing Status	s 🗵	Single					Head of he	ouseh	old (HOF	1)				
Check only		Married filing jointly (even if only o	ne had ir	ncome)			_							
one box.		Married filing separately (MFS)					☐ Qualifying		0 1	`	,			
		you checked the MFS box, enter the			use. If you	ı che	cked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	
	qu	alifying person is a child but not you	ır depen	dent:										
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward, a	award, or	payn	nent for prope	rty or	services); or (b) sell,			
Assets	exch	nange, or otherwise dispose of a dig	ital asse	t (or a finar	ncial intere	est ir	n a digital asse	t)? (Se	ee instru	ction	s.)		es 🗵 No	,
Standard	Som	neone can claim: 🗌 You as a de	pendent	: <u> </u>	our spouse	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a du	al-status a	alien								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are bline	d Spo	use	: Was bor	n befo	ore Janua	arv 2.	1959		s blind	
Dependents (see instructions): (2) Social security (3) Relationship (4) Check the box if qu												fies for (see instructi	ons):
If more		irst name Last name			umber		to you		Child t		1		r other depend	
than four									[
dependents,	_													
see instruction and check	S								[
here									[
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructio	ons)						1a		103,32	8.
Attach Form(s)	b	Household employee wages not re	eported (on Form(s)	W-2						1b			
W-2 here. Also	С	·	come not reported on line 1a (see instructions)								1c			
attach Forms W-2G and	d	Medicaid waiver payments not rep			•	nstru	ctions)				1d			
1099-R if tax	е	Taxable dependent care benefits f									1e			
was withheld.	f	Employer-provided adoption bene	fits from	Form 883	9, line 29	•					1f			
If you did not get a Form	g	Wages from Form 8919, line 6 .				•					1g			
W-2, see	h	Other earned income (see instruct	,			•		i .			1h			0.
instructions.	i _	Nontaxable combat pay election (s	see instr	uctions) .			<u>1i</u>						103,32	Ω
A# C 5		Add lines 1a through 1h	 22		·	ь т	 axable interest				1z		103,34	<u> </u>
Attach Sch. B if required.	2a 3a	· –	2a 3a		_		rdinary divide				2b 3b			4.
	<u></u>		4a				axable amoun				4b			<u> </u>
Standard	5a	_	5a				axable amoun				5b			
Deduction for— Single or	6a	_	6a				axable amoun			-	6b			
Married filing	C	If you elect to use the lump-sum e		nethod. ch						. Г]			
separately, \$13,850	7	Capital gain or (loss). Attach Sche		-		•	,			. F	7		-22	5.
Married filing jointly or	8	Additional income from Schedule		•	•						8		-14,18	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	•								9		88,91	
\$27,700	10	Adjustments to income from Sche									10			
 Head of household, 	11	Subtract line 10 from line 9. This is			oss incon	ne					11		88,91	9.
\$20,800 If you checked	12	Standard deduction or itemized	deducti	ons (from	Schedule	A)					12		13,85	
any box under	13	Qualified business income deduct	ion from	Form 899	5 or Form	899	5-A				13			1.
Standard Deduction,	14										14		13,85	
see instructions.	15	Subtract line 1/1 from line 11 If zer	o or less	ontor O	This is w	our t	avabla incom				15	1	75 06	Q

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	11,824.	
Credits	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	11,824.	
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	11,824.	
	23	Other taxes, including self-en	mployment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is	your total tax					24	11,824.	
Payments	25	Federal income tax withheld	from:							
•	а	Form(s) W-2				25a 14	1,653.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	14,653.	
If you have a qualifying child, attach Sch. EIC. Payments 25 If you have a qualifying child, attach Sch. EIC. Refund 34 35a Refund 35a Direct deposit? See instructions. 36 Amount 37 You Owe 38 Third Party Designee In Sign	26	2023 estimated tax payment	s and amount a	pplied from 20)22 return			26		
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28				
	29	American opportunity credit	from Form 8863	8, line 8		29				
	30	Reserved for future use .				30				
qualifying child, attach Sch. EIC. 21 22 33 33 36 37 Refund 34 Direct deposit? See instructions.	31	Amount from Schedule 3, lin								
	32	Add lines 27, 28, 29, and 31.	These are your	total other pa	ayments and refu	ndable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	14,653.	
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	2,829.	
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	k here		35a	2,829.	
	b	Routing number 2 1 1			c Type: 🛛 🗙	Checking	Savings			
See instructions.	d	Account number 4 6 8	9 5 4 4	7						
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36				
	37	Subtract line 33 from line 24 For details on how to pay, go						07		
rou Owe	20	Estimated tax penalty (see in	_	-		38		37		
Third Dorty		you want to allow another								
		•	•				omplete	below.	X No	
Designee	De	signee's		Phone			onal ident			
	na	me		no.		num	ber (PIN)			
_		der penalties of perjury, I declare the lief, they are true, correct, and com								
Here	Yo	ur signature		Date	Your occupation		If the	e IRS se	nt you an Identity	
									IN, enter it here	
Joint return?					SOFTWARE E		`_	inst.)		
See instructions. Keep a copy for your records.		ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupati	on	Ider	the IRS sent your spouse an entity Protection PIN, enter it here ee inst.)		
	Ph	one no. (720)220-5718	8	Email address	KANDULATEJASW:	REDDY@GMAIL.C	OM			
Poid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/17/2024	P0208	2703	Self-employed	
Preparer Use Only	Fir	Firm's name GLOBAL TAXES LLC Phon					ne no. (678)965-9522			
————	Fir	m's address 245 ROONE?	CT E BRU	NSWICK N	J 08816		Firm	ı's EIN	84-3171965	
<u> </u>	/-	40.40 ()							- 1010	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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.

'EJ <i>P</i>	ASWI REDDY KANDULA	442-	29-08	304
Par	t I 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. Attach S		5	-14,188.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	(
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555 8d	()	
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends 8g			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
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)			
n	Section 951(a) inclusion (see instructions)			
0	Section 951A(a) inclusion (see instructions)			
р	Section 461(I) excess business loss adjustment			
q	Taxable distributions from an ABLE account (see instructions) 8q			
r	Scholarship and fellowship grants not reported on Form W-2 8r			
s	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan			
u	Wages earned while incarcerated			
Z	Other income. List type and amount:			
	8z			
9	Total other income. Add lines 8a through 8z		9	
n	Combine lines 1 through 7 and 9. This is your additional income. Enter here	and on Form		

10

-14,188.

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee				
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN	·			
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e		_	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h		-	
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect				
	tax law violations	24i		-	
J	Housing deduction from Form 2555	24j		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k		-	
Z	Other adjustments. List type and amount:				
05	Tatal allows allow to some Add lines Ode thousands Ode	24z		-	
25	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10	. ∟nter	nere and on		
				26	I. 4 (F 1010) 0000
	BAA	REV 02/	11/24 PRO	Schedu	le 1 (Form 1040) 2023

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

	al Revenue Service Go to www.irs.gov/ScheduleD fo	or instructions and	the latest informat	ion.	3	Sequence No. 12
	(s) shown on return					ecurity number
	JASWI REDDY KANDULA vou dispose of any investment(s) in a qualified opportunity	fund during the to	x year?		-29-	0804
_	es," attach Form 8949 and see its instructions for additiona	_	-			
Pa	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year o	or Less (se	e ins	tructions)
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	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949,	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
who	e dollars.			line 2, colum	n (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 Box A checked	11.	15.			-4.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (l	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise			e any long-	7	-4.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets F	leld More Than	One Year	(see i	instructions)
lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colum	Part II,	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	187.	252.			-65.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked	42.	198.			-156.
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
	Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions				12 13	

14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

-221.

14

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -225.• 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. 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 225.) 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X 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.

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.

OMB No. 1545-0074 Attachment

Sequence No. 12A

Name(s) shown on return TEJASWI REDDY KANDULA Social security number or taxpayer identification number

442-29-0804

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

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

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

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

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

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

(C) Short-term transactions	not reported	to you on F	orm 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, i If you enter an enter a c See the ser	nn (g), Cain or (loss) Subtract column (e) from column (d) and combine the result	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	
Robinhood Securities LLC	01/01/23	12/31/23	11.	15.			-4.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above should be placed or line 2 (if Box A).	al here and inc is checked), lir	lude on your ne 2 (if Box B	11	15			_4

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

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

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

Social security number or taxpayer identification number 442-29-0804

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(E) Long-term transactions(F) Long-term transactions	reported on l	Form(s) 1099	-B showing bas				e)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/22	12/31/23	187.	252.			-65.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above	al here and inc	lude on your					

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.

above is checked), or line 10 (if Box F above is checked) .

187.

252.

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 TEJASWI REDDY KANDULA

Social security number or taxpayer identification number 442-29-0804

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	RS (see N	Note above)

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

	Į		(F	Long-term	transactions	not re	ported to	you on	Form	1099-B
--	---	--	----	-----------	--------------	--------	-----------	--------	------	--------

(F) Long-term transactions	not reported	to you on Fc	JIII 1099-D				
(a) Description of property	(b) (c) Date acquired disposed of		Proceeds	(e) Cost or other basis See the Note below	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss) Subtract column (e) from column (d) and	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g).
Robinhood Crypto LLC	01/01/22	12/31/23	42.	198.			-156.
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	al here and inc is checked), lir	lude on your ne 9 (if Box E	42.	198.			-156.

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

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

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

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

TEJA	ASWI REDDY KANDULA						442-2	. 🗌 Yes 🔀 No					
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			e C. See	instru	ctions. If you are	e an ind	ividual, rep	ort farm				
	Did you make any payments in 2023 that would require you								s 🛚 No				
В	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No				
1a	Physical address of each property (street, city, state, ZIF	ode	e)										
Α	Hasthinapuram HYDERABAD TELANGANA IN 5	5000	79										
В													
С													
1b	Type of Property (from list below) 2 For each rental real estate prope above, report the number of fair	rental	and		Fa	ir Rental Days	Personal Use Days		QJV				
Α	personal use days. Check the Q			Α		365		0					
В	if you meet the requirements to f qualified joint venture. See instru	ile as	a	В									
С	quaimed joint venture. See institu	ICTIONS	5.	С									
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya		-	Self-Rental Other (describ							
						Propertie	s:	1					
Incon				Α		В			С				
3	Rents received	3		- 6	12.								
4	Royalties received	4											
Expe		_											
5	Advertising	5 6											
6	Auto and travel (see instructions)	7		1,8	71								
7 8		8		1,0	74.								
9	Commissions	9											
10	Insurance	10								_			
11	Management fees	11		1,3	20					_			
12	Mortgage interest paid to banks, etc. (see instructions)	12		1,3	20.					_			
13	Other interest	13								_			
14	Repairs	14		2,3	16					_			
15	Supplies	15		2,7						_			
16	Taxes	16			J					_			
17	Utilities	17		2.5	43.					_			
18	Depreciation expense or depletion	18		3,9						_			
19	Other (list)	19		- , ,						_			
20	Total expenses. Add lines 5 through 19	20		14,8	00.					_			
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		-14,1									
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		14,18		())(
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		612.						
b	Total of all amounts reported on line 4 for all royalty prop				23b								
С	Total of all amounts reported on line 12 for all properties				23c								
d	Total of all amounts reported on line 18 for all properties				23d	3,	996.						
е	Total of all amounts reported on line 20 for all properties				23e	14,	800.						
24	Income. Add positive amounts shown on line 21. Do not	t inclu	de any lo	sses			24						
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lir	ne 22. Er	nter to	tal losses here	25	(14,188.)			
26	Total rental real estate and royalty income or (loss).												
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this ar						26		-14,188				

Form **8995**

Department of the Treasury Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2023

Attachment Sequence No. **55**

Name(s) shown on return	Your taxpayer identification number			
TEJASWI REDDY KANDULA	442-29-0804			

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	1	(c) Qualified business income or (loss)	
i					
ii					
iii					
iv					
v					
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2			
3 4	Qualified business net (loss) carryforward from the prior year	3 (5		
5 6	Qualified business income component. Multiply line 4 by 20% (0.20)	6 3.	5		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	8 3.			
9			9	1.	
10	Qualified business income deduction before the income limitation. Add lines 5 and	i i	10	1.	
11	Taxable income before qualified business income deduction (see instructions)	11 75,069.			
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	12 1.			
13	Subtract line 12 from line 11. If zero or less, enter -0	13 75,068.	4.4	15 014	
14	Income limitation. Multiply line 13 by 20% (0.20)	14	15,014.		
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also the applicable line of your return (see instructions)	15	1		
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	(0.	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a	10	(0.		
••	zero, enter -0		17	(0.	

Passive Activity Loss Limitations

See separate instructions.

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

OMB No. 1545-1008

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

Go to www.irs.gov/Form8582 for instructions and the latest information.

	20 23 Attachment				
	Sequence No. 858				
Identifying number					

TEJZ	ASWI REDDY KANDULA				442	-29-	-0804
Pa	rt I 2023 Passive Activity Loss	S			•		
	Caution: Complete Parts IV ar	nd V before comple	eting Part I.				
Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)							
1a	Activities with net income (enter the a	mount from Part I\	/, column (a))	1a	0.		
b	Activities with net loss (enter the amount				14,188.)		
C	Prior years' unallowed losses (enter the)		
d	Combine lines 1a, 1b, and 1c					1d	-14,188.
All O	ther Passive Activities						-
2a	Activities with net income (enter the a	mount from Part V	, column (a)) .	2a			
b	Activities with net loss (enter the amo)		
С	Prior years' unallowed losses (enter th)		
d	Combine lines 2a, 2b, and 2c					2d	
3	Combine lines 1d and 2d and subtra				this line is		
3	zero or more, stop here and include prior year unallowed losses entered	this form with you	ur return; all losse	es are allowed, inc	cluding any		
	normally used					3	-14,188.
	If line 3 is a loss and: • Line 1d is a l	loss, go to Part II.					
	• Line 2d is a l	loss (and line 1d is	zero or more), sk	ip Part II and go to	line 10.		
	on: If your filing status is married filing	separately and yo	ou lived with your	spouse at any tim	ne during the	year,	do not complete
	I. Instead, go to line 10.						
Par	t II Special Allowance for Rer			-			
	Note: Enter all numbers in Par	•		tions for an examp	ole.		
4	Enter the smaller of the loss on line 1					4	14,188.
5	Enter \$150,000. If married filing separ	-			50,000.		
6	Enter modified adjusted gross income				03,107.		
	Note: If line 6 is greater than or equal	to line 5, skip line	s 7 and 8 and ent	er -0-			
	on line 9. Otherwise, go to line 7.						
7	Subtract line 6 from line 5			7	46,893.	8	23,447.
8			ter more than \$25,000. If married filing separately, see instructions				
9	Enter the smaller of line 4 or line 8. If	line 3 includes any	/ CRD, see instruc	ctions		9	14,188.
Par							
10	Add the income, if any, on lines 1a an				1	10	0.
11	Total losses allowed from all passiv out how to report the losses on your to	ax return			ions to find	11	14,188.
Par	t IV Complete This Part Before	e Part I, Lines 1	a, 1b, and 1c. S	ee instructions.			
					Ove	rall ga	in or loss
Name of activity		(a) Net income (b) Net loss (line 1a) (line 1b)		(c) Unallowed loss (line 1c) (d) Gai		1	(e) Loss
Has	thinapuram 0. 14,188.				14,188.		
Total	Enter on Part I, lines 1a, 1b, and 1c	0.	14,188.				

Form 8582 (2023) Page **2**

Part V Complete This Part Befor	e Part I, Lines 2	a, 2b,	and 2c. S	ee instru	ctions.				
Name of activity	Currer	nt year		Prior years		Overall gain or loss		ain or loss	
Name of activity	(a) Net income (line 2a)	(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss	
Total. Enter on Part I, lines 2a, 2b, and 2c									
Part VI Use This Part if an Amour	nt Is Shown on F	Part II,	, Line 9. S	ee instruc	ctions.				
Name of activity	Form or schedule and line number to be reported on (see instructions)	(а) Loss	(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).	
Hasthinapuram	E Ln 22		14,188.	1.0000	0000	14,18	8.	0.	
Total			14,188.	1.0	0	14,18	8.	0.	
Part VII Allocation of Unallowed L	osses. See instr								
Name of activity	Form or sche and line nur to be reporte (see instruct	nber ed on	(a) l	Loss	ss (b) Ratio		(c) Unallowed loss		
Total						1.00			
Part VIII Allowed Losses. See instr									
Name of activity	Form or sche and line nur to be reporte (see instruct	nber ed on	ber d on (a) Loss		(b) Unallowed loss		((c) Allowed loss	
Total									