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 Tax		urn	202	3	OMB No. 1545-	0074	IRS Use Only	–Do not v	vrite or staple in this space.
For the year Jar	c. 31, 2023, or other tax year beginning		, 2023, ending , 20				See separate instructions.				
Your first name	iddle initial	ame						Your social security number			
VINOD K		ĹΑ						848	56 5410		
If joint return, s	s first name and middle initial	ame						Spouse's social security number			
SAILAJA		JΑ						APP LI ED F			
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.				A	pt. no.	Preside	ential Election Campaig
7424 YE	ARWO	OD DR									here if you, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	te	ZIP c	ode		if filing jointly, want \$3 this fund. Checking a
MCKINNE?	Y					TX	ζ	750	71		low will not change
Foreign country	y name			Foreign p	rovince/state/o	count	ty	Foreig	n postal code	your ta	x or refund.
-											You Spous
Filing Status	s \square	Single					☐ Head of ho	ouseh	old (HOH)		
Check only	X	Married filing jointly (even if only o	ne had	income)			_				
one box.		Married filing separately (MFS)							ing spouse		
		ou checked the MFS box, enter the			pouse. If you	ı 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 depe	ndent:							
Digital	At ar	ny time during 2023, did you: (a) rec	eive (as	a reward	d. award. or	pavr	ment for proper	tv or	services): or	(b) sell.	
Assets		lange, or otherwise dispose of a dig						-			☐ Yes ☐ No
Standard	Som	eone can claim: You as a de	penden	nt 🗌	Your spouse	e as	a dependent				
Deduction		Spouse itemizes on a separate retur	n or yo	u were a	dual-status	alien					
Age/Blindnes	s You:	: Were born before January 2, 1	959 [Are b	lind Spo	use	: Was born	n befo	ore January 2	2, 1959	☐ Is blind
Dependent	s (see	instructions):		(2) 3	Social security		(3) Relationshi	_p (4) Check the b	ox if qual	ifies for (see instructions)
If more		1) First name Last name			number to you			.	Child tax cr	redit	Credit for other dependent
than four											
dependents, see instruction											
and check	s 										
here											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruc	ctions)					. 18	181,152.
Attach Form(s)	b	Household employee wages not re	eported	on Form	n(s) W-2					. 1k)
W-2 here. Also	С	Tip income not reported on line 1a	`		,					. 10	;
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	ictions)			. 10	i
1099-R if tax	е	Taxable dependent care benefits f								. 16)
was withheld.	f	Employer-provided adoption bene	fits fror	m Form 8	3839, line 29					. 11	
If you did not get a Form	g	Wages from Form 8919, line 6 .								. 10	
W-2, see	h	Other earned income (see instruct	,					· ·		. 1h	0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions))		<u>li</u>				101 150
	<u>z</u>	Add lines 1a through 1h			· · i ·					. 12	
Attach Sch. B if required.	2a	' -	2a		125.		axable interest			. 2k	
	3a		3a				ordinary divider			. 3k	
Standard	4a	-	4a				axable amount			. 4k	
Deduction for—	5a	-	5a				axable amount			. 5k	
 Single or Married filing 	6a	,	6a	mothad			axable amount			. 6k	
separately, \$13,850	7	If you elect to use the lump-sum e Capital gain or (loss). Attach Sche							L	-	2,767.
 Married filing 		, ,		•			-		L	_	
jointly or Qualifying surviving spouse, \$27,700 Head of household. Subtract line 10 from line 9. This is your total income Additional income from Schedule 1, line 10 from line 9. This is your total income Additional income from Schedule 1, line 10 from total income Additional income from Schedule 1, line 10 from total income Additional income from Schedule 1, line 10 from total income Additional income from Schedule 1, line 10 from total income Additional income from Schedule 1, line 10 from total income But Income from Schedule 1, line 10 from total income Additional income from Schedule 1, line 10 from total income But Income from Schedule 1, line 10 from total income But Income from Schedule 1, line 10 from total income from Schedule 1, line 26 from from Schedule 1, line 10 from from Schedule 1, line 10 from from from from from from from from											
household, \$20,800 Standard deduction or itemized deductions (from Schedule A)										. 12	
If you checked any box under	12 13	Qualified business income deduct					 5-Δ			. 13	
Standard	14	A 111 40 140				JJJ	υ Λ			. 14	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer				 our i	taxable incom	е .		-	
				.,	y						

Form 1040 (2023	3)								Page 2		
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	25,002.		
Credits	17	Amount from Schedule 2, lin		17							
	18	Add lines 16 and 17						18	25,002.		
	19	Child tax credit or credit for	other dependent	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	. If zero or less,	enter -0				22	25,002.		
	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	25,002.		
Payments	25	Federal income tax withheld	l from:								
_	а	Form(s) W-2									
	b	Form(s) 1099									
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c						25d	36,625.		
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)				27					
allacii Scii. Elc.	28	Additional child tax credit from	m Schedule 8812	·		28					
	29	American opportunity credit	from Form 8863	3, line 8		29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lin									
	32	Add lines 27, 28, 29, and 31	32								
	33	Add lines 25d, 26, and 32. T	33	36,625.							
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amoun	t you overpaid		34	11,623.		
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	3 is attached, chec	k here		35a	11,623.		
Direct deposit?	b	Routing number 1 2 1			c Type: 🛛	Checking	Savings				
See instructions.	d	Account number 2 0 1									
	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	nstructions) .			38					
Third Party	Do	you want to allow another				See		_			
Designee		structions	below.	⋈ No							
		esignee's	Phone no.		onal identi ber (PIN)	fication					
<u></u>		me	ba baat	of my limaniladae and							
Sign		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.									
Here	Vo	ur signature	Date	Your occupation		lf the	IRS se	nt you an Identity			
	10	di Signature	Tour occupation			I .		IN, enter it here			
Joint return?			SOFTWARE ENGINEER			(see	(see inst.)				
See instructions. Keep a copy for	Sp	Spouse's signature. If a joint return, both must sign.		Date Spouse's occupation				f the IRS sent your spouse an			
your records.					HOME MAKED				Identity Protection PIN, enter it here (see inst.)		
		-na na (400) E40 (40	Empil address	HOME MAKER	,						
		Phone no. (408) 549-6408 Email address VINODK.DULLA@GMAIL.COM Preparer's name Preparer's signature Date PTIN							Check if:		
Paid		·	'		רווסתו האודדאיי		P0208	2702	Self-employed		
Preparer											
Use Only									(678) 965-9522		
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Fir							's EIN	84-3171965		

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

OMB No. 1545-0074

2023

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

VINOD KUMAR DULLA & SAILAJA MUVVA

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.

Your social security number 848-56-5410

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 10,378. 7,672. 2,706. Totals for all transactions reported on Form(s) 8949 with Box B checked 17,415. 17,354. 61. 3 Totals for all transactions reported on Form(s) 8949 with 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 2,767. 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 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

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

12

13

14

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 2,767. 16 Combine lines 7 and 15 and enter the result 16 • 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 • (\$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.

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

Internal Revenue Service							
Name(s) shown on return							

Department of the Treasury

VINOD KUMAR DULLA & SAILAJA MUVVA

Social security number or taxpayer identification number

848-56-5410

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 (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below	Adjustment, if If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)				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	01/01/23	12/31/23	10,378.	7,672.			2,706.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C)	al here and inc is checked), lir	lude on your ne 2 (if Box B	10,378.	7,672.			2,706.

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.

8949

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

Internal Revenue Service Name(s) shown on return

Department of the Treasury

Social security number or taxpayer identification number

848-56-5410

VINOD KUMAR DULLA & SAILAJA MUVVA

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. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above) X (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss

1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below	If you enter an enter a co	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.)			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).
Morgan Stanley Smith Barney, LLC	01/01/23	12/31/23	17,415.	17,354.			61.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).			17,415.	17,354.			61.

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.



Application for IRS Individual Taxpayer Identification Number

► For use by individuals who are not U.S. citizens or permanent residents.

► See separate instructions.

An IRS individual taxpayer identification number (ITIN) is for U.S. federal tax purposes only.

OMB No. 1545-0074

Application type (check one box):

Apply for a new ITIN Before you begin: Renew an existing ITIN Don't submit this form if you have, or are eligible to get, a U.S. social security number (SSN). Reason vou're submitting Form W-7. Read the instructions for the box you check. Caution: If you check box b, c, d, e, f, or g, you must file a U.S. federal tax return with Form W-7 unless you meet one of the exceptions (see instructions). a Nonresident alien required to get an ITIN to claim tax treaty benefit **b** Nonresident alien filing a U.S. federal tax return c U.S. resident alien (based on days present in the United States) filing a U.S. federal tax return If d, enter relationship to U.S. citizen/resident alien (see instructions) ▶ **d** Dependent of U.S. citizen/resident alien e X Spouse of U.S. citizen/resident alien If d or e, enter name and SSN/ITIN of U.S. citizen/resident alien (see instructions) ▶ VINOD KUMAR DULLA 848-56-5410 f Union Nonresident alien student, professor, or researcher filing a U.S. federal tax return or claiming an exception g Dependent/spouse of a nonresident alien holding a U.S. visa h ☐ Other (see instructions) ▶ Additional information for a and f: Enter treaty country ▶ and treaty article number ▶ 1a First name Middle name Last name Name SAILAJA AVVUIM (see instructions) Middle name 1b First name Last name Name at birth if different . . 2 Street address, apartment number, or rural route number. If you have a P.O. box, see separate instructions. Applicant's 7424 YEARWOOD DR **Mailing** City or town, state or province, and country. Include ZIP code or postal code where appropriate. **Address** 75071 MCKINNEY USA 3 Street address, apartment number, or rural route number. Don't use a P.O. box number. Foreign (non-**U.S.) Address** City or town, state or province, and country. Include postal code where appropriate. (see instructions) 4 Date of birth (month / day / year) Country of birth City and state or province (optional) Male Birth 04/14/1997 Information TNDTA ▼ Female 6a Country(ies) of citizenship **6b** Foreign tax I.D. number (if any) 6c Type of U.S. visa (if any), number, and expiration date Other INDIA Information **6d** Identification document(s) submitted (see instructions) X Passport ☐ Driver's license/State I.D. Other ☐ USCIS documentation Date of entry into the United States No.: Z3695825 Exp. date: 03/30/2026 Issued by: INDIA (MM/DD/YYYY): 6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)? No/Don't know. Skip line 6f. Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions). 6f Enter ITIN and/or IRSN ▶ ITIN **IRSN** and name under which it was issued ▶ First name Middle name Last name 6g Name of college/university or company (see instructions) ▶ City and state ▶ Length of stay ▶ Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying Sign documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number. Here Signature of applicant (if delegate, see instructions) Date (month / day / year) Phone number Keep a copy for your records. Name of delegate, if applicable (type or print) Delegate's relationship Parent Court-appointed guardian to applicant Power of attorney Date (month / day / year) Signature Phone **Acceptance** Agent's Name and title (type or print) Name of company EIN **Use ONLY** Office code