# 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

Submission Identification Number (SID)	
Taxpayer's name	Social security number
SRIDHAR B KONDAMUDI	393-57-6261
Spouse's name	Spouse's social security number
TULASI PRIYA KONDAPALLI	516-79-1737
Part I Tax Return Information — Tax Year Ending December 31,	2023 (Enter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
<b>1</b> Adjusted gross income	
2 Total tax	<u> </u>
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099	1070121
4 Amount you want refunded to you	
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization (Be sure Under penalties of perjury, I declare that I have examined a copy of the income tax return (ori	
my knowledge and belief, it is true, correct, and complete. I further declare that the amou return (original or amended) I am now authorizing. I consent to allow my intermediate service to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt for any delay in processing the return or refund, and (c) the date of any refund. If applicable, Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institt payment of my federal taxes owed on this return and/or a payment of estimated tax, and the authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Apayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment business days prior to the payment (settlement) date. I also authorize the financial institution taxes to receive confidential information necessary to answer inquiries and resolve issues personal identification number (PIN) below is my signature for the income tax return (origina Electronic Funds Withdrawal Consent.	e provider, transmitter, or electronic return originator (ERO) to reason for rejection of the transmission, (b) the reason, I authorize the U.S. Treasury and its designated Financial ution account indicated in the tax preparation software for a financial institution to debit the entry to this account. This Agent to terminate the authorization. To revoke (cancel) a cancellation requests must be received no later than 2 and involved in the processing of the electronic payment of a related to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
☐ I authorize GLOBAL TAXES LLC to en	as my
ERO firm name	don't enter all zeros
signature on the income tax return (original or amended) I am now authori	
I will enter my PIN as my signature on the income tax return (original or a if you are entering your own PIN <b>and</b> your return is filed using the Practit below.	
Your signature ►	Date ►
Spouse's PIN: check one box only	
	iter or generate my PIN 9 1 7 3 7 as my
<b>ERO firm name</b> signature on the income tax return (original or amended) I am now authori.	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or a	-
if you are entering your own PIN <b>and</b> your return is filed using the Practit below.	
Spouse's signature ▶	Date ►
Practitioner PIN Method Returns Only—c	ontinue below
Part III Certification and Authentication — Practitioner PIN Method	l Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected	PIN. 2 2 2 4 9 6 0 8 2 7 1  Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic industrial authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-	m that I am submitting this return in accordance with the
ERO's signature ▶	Date ►
ERO Must Retain This Form — See Ir	

Don't Submit This Form to the IRS Unless Requested To Do So

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



£1040		artment of the Treasury—Internal Revenue Servi		urn	202	3	OMB No. 1545-0	0074	IRS Use Only	–Do not v	vrite or staple in this	space.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, endi	ing			, 20	See se	parate instructi	ons.
Your first name	and m	iddle initial	Last na	me						Your so	ocial security nur	mber
SRIDHAR	В		KOND	AMUDI						393	57 6261	
		s first name and middle initial	Last na								's social security	
TULASI	PRTY.	Α	KOND	APALL	Т					516	79   1737	
		er and street). If you have a P.O. box, see						Α	pt. no.		ential Election Ca	
1233 SI	YIIC	STREET							•	ł	here if you, or yo	
		ce. If you have a foreign address, also co	omplete s	paces belo	ow.	Sta	te	ZIP co	ode		if filing jointly, w	
CARROLL'	TON					ТХ	ζ	750	10		o this fund. Chec low will not chan	_
Foreign countr			F	Foreign pro	ovince/state/c				n postal code	I	x or refund.	ge
											You	Spouse
Filing Status	s [	Single					Head of ho	useh	old (HOH)			
Check only		Married filing jointly (even if only o	ne had i	ncome)					, ,			
one box.		Married filing separately (MFS)		,			☐ Qualifying s	surviv	ing spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name c	of your sp	ouse. If you	che	ecked the HOH	or Q	SS box, ente	r the ch	ild's name if the	Э
		alifying person is a child but not you			-							
Distribut	Λ+ α	ny time during 2023, did you: (a) rec	oivo (as	a roward	award or r	201/12	mont for proport	or	convious): or	(b) coll		
Digital Assets		nange, or otherwise dispose of a dig				-		-			☐ Yes 🏻 🔻	No
Standard		neone can claim: You as a de					a dependent	. (00				
Deduction	_	Spouse itemizes on a separate retur	•		•		•					
		<u> </u>		- word a c	idai Status e	anor i						
Age/Blindnes	s You	: Were born before January 2, 1	959 _	_ Are bliı	nd <b>Spo</b>	use	: U Was born		re January 2	-	Is blind	
Dependent					ocial security		(3) Relationship	, (4			ifies for (see instru	
If more	(1) F	irst name Last name			number		to you		Child tax c	redit	Credit for other de	pendents
than four	ESI	HAAN KONDAMUDI		271-	-75 <b>-</b> 6241	1	Son		×			
dependents, see instruction	s								<u> </u>			
and check	, —											
here L				L						<u> </u>		0.0.1
Income	1a	Total amount from Form(s) W-2, b	,		,							984.
Attach Form(s)	b	Household employee wages not re	•									
W-2 here. Also	С.	Tip income not reported on line 1a	,		,					. 10		
attach Forms W-2G and	d	Medicaid waiver payments not rep				ıstru	ictions)			. 10		
1099-R if tax	e	Taxable dependent care benefits f		•		•				. 16		
was withheld.	Ť	Employer-provided adoption bene	etits from	n Form 88	339, line 29	•				. 11		
If you did not get a Form	g					•				. 10	<b>^</b>	
W-2, see	h :	Other earned income (see instruct	,	 		•		 I		. 1h	1	0.
instructions.	i -	Nontaxable combat pay election (s	see instr	uctions)		•	<u>li</u>				103,	921
AH! 0 ! 5		Add lines 1a through 1h			· · · ·	h T	axable interest			. 12		JU4.
Attach Sch. B if required.	2a	· -	2a 3a				axable interest Ordinary dividen	de		. 2b		33.
	3a_ 4a		4a				axable amount			. 31 . 4b		
Standard	5a	_	<del>ч</del> а 5а				axable amount					
Deduction for—	6a	_	6a				axable amount			. 6k		
<ul> <li>Single or Married filing</li> </ul>	C	If you elect to use the lump-sum e	_	method o						.   51		
separately, \$13,850	7	Capital gain or (loss). Attach Sche		•	,		,		[	7		373.
<ul> <li>Married filing</li> </ul>	8	Additional income from Schedule								_ <u> </u>		
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9		561.
surviving spouse, \$27,700	10	Adjustments to income from Sche		•						. 10		700.
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is								. 11		861.
\$20,800	12	Standard deduction or itemized	-							. 12		700.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deduct		,		,	5-A			. 13		0.
Standard	14					555				. 14		700.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer				1	tavahla incomo			15		161

Form 1040 (2023	3)								Page Z
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	7,375.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	7,375.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	2,000.
	20	Amount from Schedule 3, lin	ne 8					20	2,000.
	21	Add lines 19 and 20						21	4,000.
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0				22	3,375.
	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 <b>total tax</b>					24	3,375.
<b>Payments</b>	25	Federal income tax withheld	I from:						
_	а	Form(s) W-2				<b>25a</b> 15	5,512.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	15,512.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	)22 return			26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27			
allacii Scii. ElC.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir	ne 15			31			
	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 <b>to</b>	tal payments				33	15,512.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amoun	t you <b>overpaid</b>		34	12,137.
	35a	Amount of line 34 you want			is attached, chec	k here	🗆	35a	12,137.
Direct deposit?	b	Routing number 1 1 1							
See instructions.	d	Account number 9 3 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				. 🗌 Yes. C	omplete	below.	<b>⋈</b> No
_		esignee's		Phone			onal iden	tification	
		me		no.	. ,		ber (PIN)		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com							
Here	Vo	ur signature	•	Date	Your occupation		l If th	 IBS sa	nt you an Identity
	10	ur signature		Date	Tour occupation		I .		IN, enter it here
Joint return?					SOFTWARE E	NGINEER	(see	e inst.)	
See instructions.	Sp	ouse's signature. If a joint return,	<b>both</b> must sign.	Date	Spouse's occupation	on			nt your spouse an
Keep a copy for your records.		. 5 , , , ,			STUDENT		I .	ntity Prote inst.)	ection PIN, enter it here
	Ph	one no. (848) 242-641	0	Email address	SRIDHARNAS	@GMAIL.CON	1		
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/22/2024	P0208	32703	Self-employed
Preparer Use Only	Fir	Firm's name GLOBAL TAXES LLC							(678) 965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firr	n's EIN	84-3171965

# SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

SRIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 393-57-6261

Par	t 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	ich Schedule E .	5	-10,083.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q p8		
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	8s (		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter			
	1040. 1040-SR. or 1040-NR. line 8		10	-10,083.

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

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis 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	700.
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade		
_	Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans		
g	Contributions by certain chaplains to section 403(b) plans 24g		
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)		
İ	Attorney fees and court costs you paid in connection with an award		
	from the IRS for information you provided that helped the IRS detect tax law violations		
		_	
j	Housing deduction from Form 2555	_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
_	1041)	-	
Z	Other adjustments. List type and amount:		
25		25	
25 26	Total other adjustments. Add lines 24a through 24z	25	
∠0	Form 1040, 1040-SR, or 1040-NR, line 10	26	700.
	1 5.11.1 10.10, 10.70 011, 01.10.70 1111, 1110.10		/00.

# SCHEDULE 3 (Form 1040)

Department of the Treasury

**Additional Credits and Payments** 

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. 03

Internal Revenue Service Go to www.irs.gov/Fo

SRIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI

**Your social security number** 393-57-6261

Toreign tax credit. Attach Form 1116 if required Credit for child and dependent care expenses from Form 2441, line 11. Form 2441  Education credits from Form 8863, line 19 Retirement savings contributions credit. Attach Form 8880  Energy efficient home improvement credit from Form 5695, line 15 Energy efficient home improvement credit from Form 5695, line 32  Other nonrefundable credits: General business credit. Attach Form 3800 Credit for prior year minimum tax. Attach Form 8801 Credit for the elderly or disabled. Attach Schedule R Reserved for future use General credit. Attach Form 8936 General decredit. Attach Form 8936 General decredi			
Form 2441  3 Education credits from Form 8863, line 19  4 Retirement savings contributions credit. Attach Form 8880  5a Residential clean energy credit from Form 5695, line 15  b Energy efficient home improvement credit from Form 5695, line 32  6 Other nonrefundable credits:  a General business credit. Attach Form 3800  b Credit for prior year minimum tax. Attach Form 8801  c Adoption credit. Attach Form 8839  d Credit for the elderly or disabled. Attach Schedule R  e Reserved for future use  f Clean vehicle credit. Attach Form 8936  g Mortgage interest credit. Attach Form 8396  h District of Columbia first-time homebuyer credit. Attach Form 8859  i Qualified electric vehicle credit. Attach Form 8834  j Alternative fuel vehicle refueling property credit. Attach Form 8911  k Credit to holders of tax credit bonds. Attach Form 8912  6 k  I Amount on Form 8978, line 14. See instructions  6 m  Credit for previously owned clean vehicles. Attach Form 8936  6 m		1	
A Retirement savings contributions credit. Attach Form 8880	. Attach	2	
5aResidential clean energy credit from Form 5695, line 15	[	3	2,000.
b Energy efficient home improvement credit from Form 5695, line 32  6 Other nonrefundable credits:  a General business credit. Attach Form 3800	[	4	
6 Other nonrefundable credits: a General business credit. Attach Form 3800	[	5a	
a General business credit. Attach Form 3800	[	5b	
b Credit for prior year minimum tax. Attach Form 8801			
c Adoption credit. Attach Form 8839			
d Credit for the elderly or disabled. Attach Schedule R 6d e Reserved for future use			
e Reserved for future use			
f Clean vehicle credit. Attach Form 8936			
g Mortgage interest credit. Attach Form 8396			
h District of Columbia first-time homebuyer credit. Attach Form 8859 i Qualified electric vehicle credit. Attach Form 8834 6i j Alternative fuel vehicle refueling property credit. Attach Form 8911 k Credit to holders of tax credit bonds. Attach Form 8912 6k l Amount on Form 8978, line 14. See instructions 6l m Credit for previously owned clean vehicles. Attach Form 8936 . 6m			
<ul> <li>i Qualified electric vehicle credit. Attach Form 8834</li> <li>j Alternative fuel vehicle refueling property credit. Attach Form 8911</li> <li>k Credit to holders of tax credit bonds. Attach Form 8912</li> <li>j Amount on Form 8978, line 14. See instructions</li> <li>j Gi</li> <li>j Alternative fuel vehicle refueling property credit. Attach Form 8911</li> <li>j Gi</li> &lt;</ul>			
j Alternative fuel vehicle refueling property credit. Attach Form 8911 k Credit to holders of tax credit bonds. Attach Form 8912 6k l Amount on Form 8978, line 14. See instructions 6l m Credit for previously owned clean vehicles. Attach Form 8936 . 6m			
<ul> <li>k Credit to holders of tax credit bonds. Attach Form 8912 6k</li> <li>I Amount on Form 8978, line 14. See instructions 6l</li> <li>m Credit for previously owned clean vehicles. Attach Form 8936 . 6m</li> </ul>			
I Amount on Form 8978, line 14. See instructions			
m Credit for previously owned clean vehicles. Attach Form 8936 . 6m			
· · · · · · · · · · · · · · · · · · ·			
z Other nonrefundable credits. List type and amount:			
6z			
7 Total other nonrefundable credits. Add lines 6a through 6z	[	7	
<b>8</b> Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 1040, 1040 1040-NR, line 20	)-SR, or	8	2,000.

Schedule 3 (Form 1040) 2023 Page **2** 

Par	Other Payments and Refundable Credits				
9	Net premium tax credit. Attach Form 8962			9	
10	Amount paid with request for extension to file (see instructions)			10	
11	Excess social security and tier 1 RRTA tax withheld			11	
12	Credit for federal tax on fuels. Attach Form 4136			12	
13	Other payments or refundable credits:				
а	Form 2439	13a			
b	Credit for repayment of amounts included in income from earlier years	13b			
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c			
d	Deferred amount of net 965 tax liability (see instructions)	13d			
Z	Other payments or refundable credits. List type and amount:	13z			
14	Total other payments or refundable credits. Add lines 13a through	13z		14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	-	-	15	

# 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

SRIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI

Your social security number 393-57-6261

	you dispose of any investment(s) in a qualified opportunity 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 e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	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
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.			line 2, colum	n (g)	with column (g)
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	8,863.	8,375.			488.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked	2.	5.			-3.
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4 5		S corporations,	estates, and tr	usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	-	our Capital Loss	_	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	485.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets H	leld More Than	One Year	(see i	nstructions)
	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	<b>(e)</b> Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
This who	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I 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 <b>Box D</b> checked	224.	1,082.			-858.
	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked	0.	0.			0.
	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11 12	
	Capital gain distributions. See the instructions				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 through 14 in column (h). Then, go to Part III

-858.

15

Schedule D (Form 1040) 2023 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -373. • 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 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 373.) 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.

## 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

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

SRIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI 393-57-6261 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 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 Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). (d) Cost or other basis Gain or (loss) (c) (a) (b) See the separate instructions. Date sold or Proceeds See the **Note** below Subtract column (e) Description of property Date acquired disposed of and see Column (e) (sales price) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (Mo., day, yr.) (see instructions) in the separate combine the result (g) Code(s) from Amount of adjustment instructions. with column (a). instructions ROBINHOOD SECURITIES LLC 01/01/23 12/31/23 8,863. 8,375. 488.

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 8,863. 8,375. above is checked), or line 3 (if Box C above is checked) . 488.

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.

Attachment Sequence No. 12A Form 8949 (2023)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SRIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI

Social security number or taxpayer identification number 393-57-6261

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.

<ul><li>★ (D) Long-term transactions</li><li>(E) Long-term transactions</li><li>(F) Long-term transactions</li></ul>	reported on l	Form(s) 1099	-B showing bas				)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a c	if any, to gain or loss amount in column (g), ode in column (f). parate 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	224.	1,082.			-858.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above	al here and incl	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) .

224.

1,082.

## 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

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

Social security number or taxpayer identification number

393-57-6261

SRIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI

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

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above) X (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a c	amount in column (g), ode in column (f). parate 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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD CRPTO LLC	01/01/23	12/31/23	2.	5.			-3.
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 6).	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	2.	5.			-3.

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.

Attachment Sequence No. 12A Form 8949 (2023)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SRIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI

Social security number or taxpayer identification number 393-57-6261

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-te	rm tra	ansaction	ns report	ed on F	Form(s)	1099-E	3 showing	basis	was re	eported	to the	e IRS	(see	Note	above)
 <b>/</b> -\						- /\	4000 0							20		

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

(F)	<b>)</b> Long-terr	m transactions	not reported	to you on	Form 1099-E

☐ (F) Long-term transactions not reported to you on Form 1099-B								
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss) Subtract column (e)		
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).	
ROBINHOOD CRPTO LLC	01/01/22	12/31/23	0.	0.			0.	
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 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked).			0.	0.			0.	

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 02/11/24 PRO

# SCHEDULE E (Form 1040)

Department of the Treasury

#### **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.

2023
Attachment Sequence No. 13

OMB No. 1545-0074

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

Name(s) shown on return

Sequence No. 15

Your social security number

SRI	DHAR B KONDAMUDI & TULASI PRIYA KONDAPA	LLI					393-5	7-6261	
Par		nd Roy	yalties						
	<b>Note:</b> If you are in the business of renting personal proper rental income or loss from <b>Form 4835</b> on page 2, line 40.	rty, use	Schedule	<b>C</b> . See	instru	ctions. If you	are an indiv	vidual, rep	ort farm
Α	Did you make any payments in 2023 that would require you		Form(s) 1	0997.5	See ins	structions		□ Ye	s X No
	If "Yes," did you or will you file required Form(s) 1099?								
1a	Physical address of each property (street, city, state, ZIF					· · · ·			<u> </u>
			<u> </u>						
_ <u>A</u>	RAJUPALEM VILLAGE BALLIKURAVA MANDAL	ANDH	IRA PRA	ADESH	IN	523301			
<u>B</u>									
С	T (D )   0 E   1   1   1   1   1   1   1   1   1								
1b	Type of Property (from list below) 2 For each rental real estate properties above, report the number of fair	erty list	ed and		Fa	ir Rental Days	Person Da		QJV
Α	gersonal use days. Check the Qu			Α		365	Da	0	
В	if you meet the requirements to the	file as a	a	В		303		0	
C	qualified joint venture. See instru	uctions	i.	С					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Land	l	7	Self-Rental			
	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
	•		,						
l				Α		Propert	ies:		
Incor 3	ne: Rents received	3		<b>A</b>	00.	В			С
4	Royalties received	4		0	00.				
	nses:	+							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,2	00.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,0	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		2,4					
15	Supplies	15		2,4	75.				
16	Taxes	16							
17	Utilities	17		3,5	91.				
18	Depreciation expense or depletion	18							
19	Other (list)	19		10 0	0.0				
20	Total expenses. Add lines 5 through 19	20		10,6	83.				
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 <b>Form 6198</b>	21	_	-10,0	83.				
22	Deductible rental real estate loss after limitation, if any,			-, -					
	on <b>Form 8582</b> (see instructions)	22	(	10,08	3.)	(	)	(	,
23a	Total of all amounts reported on line 3 for all rental prope	$\perp$			23a	<b>x</b>	600.	`	
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				
е	Total of all amounts reported on line 20 for all properties				23e	1	0,683.		
24	Income. Add positive amounts shown on line 21. Do not		•				. 24		
25	Losses. Add royalty losses from line 21 and rental real estat							(	10,083.
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						1 1		10 000
	Schedule 1 (Form 1040), line 5. Otherwise, include this at	mount	in the to	iai on II	ne 41	on page 2	. 26		-10,083.

#### **SCHEDULE 8812** (Form 1040)

### **Credits for Qualifying Children** and Other Dependents

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

OMB No. 1545-0074

Attachment Sequence No. **47** 

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

Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Your social security number

SRID:	RIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI 393-				
Par	t I Child Tax Credit and Credit for Other Dependents				
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR		1	92,861.	
2a	Enter income from Puerto Rico that you excluded				
b	Enter the amounts from lines 45 and 50 of your Form 2555	0.			
c	Enter the amount from line 15 of your Form 4563				
d	Add lines 2a through 2c		2d	0.	
3	Add lines 1 and 2d		3	92,861.	
4	Number of qualifying children under age 17 with the required social security number  4	1			
5	Multiply line 4 by \$2,000		5	2,000.	
6	Number of other dependents, including any qualifying children who are not under age				
	17 or who do not have the required social security number	0			
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resid	lent			
	alien. Also, do not include anyone you included on line 4.				
7	Multiply line 6 by \$500	-	7		
8	Add lines 5 and 7		8	2,000.	
9	Enter the amount shown below for your filing status.				
	• Married filing jointly—\$400,000				
	• All other filing statuses—\$200,000 $\int$		9	400,000.	
10	Subtract line 9 from line 3.				
	• If zero or less, enter -0				
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For				
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.		10	0.	
11	Multiply line 10 by 5% (0.05)		11	0.	
12	Is the amount on line 8 more than the amount on line 11?	-	12	2,000.	
	No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit.	edit.			
	Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.				
12	Yes. Subtract line 11 from line 8. Enter the result.		12	5 005	
13 14	Enter the amount from Credit Limit Worksheet A		13	5,375.	
14	Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents Enter this amount on Form 1040 1040 SP, or 1040 NP, line 10		14	2,000.	
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.	and als	1.1.4		
	If the amount on line 12 is more than the amount on line 14, you may be able to take the <b>addition</b>				
	on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-N	K UIFO	ugn I	ine 27	
	(also complete Schedule 3, line 11) before completing Part II-A.				

BAA

Schedule 8812 (Form 1040) 2023

Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line	27 .	
16a	Subtract line 14 from line 12. If zero, stop here; you cannot take the additional child tax credit. Skip Parts II-A		
	and II-B. Enter -0- on line 27	16a	0.
b	Number of qualifying children under 17 with the required social security number: x \$1,600.		
	Enter the result. If zero, stop here; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	
	<b>TIP:</b> The number of children you use for this line is the same as the number of children you used for line 4.		
17	Enter the <b>smaller</b> of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result	20	
	Next. On line 16b, is the amount \$4,800 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
Dank	Otherwise, go to line 21.	f D	t. Dian
	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	SOTP	uerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or if you are a bona fide resident of Puerto Rico, see instructions		
		-	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 .		
23	Add lines 21 and 22	-	
	1040 and	-	
24	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27,		
	and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	
26	Enter the <b>larger</b> of line 20 or line 25	26	
	Next, enter the smaller of line 17 or line 26 on line 27.		
Part	II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28.	27	

## Form **8863**

# Education Credits (American Opportunity and Lifetime Learning Credits)

Department of the Treasury Internal Revenue Service

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/Form8863 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. 50

Name(s) shown on return

SRIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI

393 57 6261

	f	1
	<u> </u>	
CA	IJΤ	ION

Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

Part	Refundable American Opportunity Credit					
1	After completing Part III for each student, enter the total of all amounts from all P	arts II	I, line	30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse	2				
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	3				
4	Subtract line 3 from line 2. If zero or less, <b>stop</b> ; you can't take any education credit	4				
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	5				
6	If line 4 is:					
	• Equal to or more than line 5, enter 1.000 on line 6					
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rou			}	6	
_	at least three places)			,		
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of th conditions described in the instructions, you can't take the refundable America					
	skip line 8, enter the amount from line 7 on line 9, and check this box				7	
8	<b>Refundable American opportunity credit.</b> Multiply line 7 by 40% (0.40). Enter			·		
Ū	on Form 1040 or 1040-SR, line 29. Then go to line 9 below.				8	
Part	Nonrefundable Education Credits					
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	(see i	instru	ctions) .	9	
10	After completing Part III for each student, enter the total of all amounts from a					
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19				10	100,858.
11	Enter the smaller of line 10 or \$10,000				11	10,000.
12	Multiply line 11 by 20% (0.20)				12	2,000.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or	40	1	00 000		
	qualifying surviving spouse	13		.80,000.	-	
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form					
	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	14		92,861.		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on	17		JZ,001.	-	
	line 18, and go to line 19	15		87,139.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or			,		
	qualifying surviving spouse	16		20,000.		
17	If line 15 is:					
	$\bullet$ Equal to or more than line 16, enter 1.000 on line 17 and go to line 18 $$ . $$ .			)		
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (round least three places)			}	17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet	(see i	nstruc	tions) .	18	2,000.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit	Limit	Work	sheet (see		
	instructions) here and on Schedule 3 (Form 1040), line 3		<u> </u>		19	2,000.

Name(s) shown on return	Your social security nur	mber
SRIDHAR R KONDAMIDI & TILLASI PRIYA KONDAPALLI	393   57	6261

		î	1
ı	CA	UT	ION

Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

Par	t III Student and Educational Institution Informatio	n. See instructions.
	Student name (as shown on page 1 of your tax return) TULASI PRIYA KONDAPALLI	21 Student social security number (as shown on page 1 of your tax return)  516-79-1737
22	Educational institution information (see instructions)	010 /3 1/0/
	Name of first educational institution	b. Name of second educational institution (if any)
	Trustees of the University of Pennsylvania	, , , , , , , , , , , , , , , , , , , ,
(	<ol> <li>Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.</li> <li>Franklin Building, 3451 Walnut Building PHILADELPHIA PA 19104</li> </ol>	(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
(	2) Did the student receive Form 1098-T from this institution for 2023?   ✓ Yes ✓ No	(2) Did the student receive Form 1098-T
(	3) Did the student receive Form 1098-T from this institution for 2022 with box ☐ Yes ☒ No 7 checked?	(3) Did the student receive Form 1098-T from this institution for 2022 with box  Yes  No 7 checked?
(	4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	(4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.
	23-1352685	
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?	$\square$ Yes — <b>Stop!</b> So to line 31 for this student. $\boxtimes$ No — Go to line 24.
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2023 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	▼ Yes — Go to line 25.
25	Did the student complete the first 4 years of postsecondary education before 2023? See instructions.	▼ Yes - <b>Stop!</b> Go to line 31 for this student. □ No - Go to line 26.
26	Was the student convicted, before the end of 2023, of a felony for possession or distribution of a controlled substance?	Yes — <b>Stop!</b> Go to line 31 for this student.  No — Complete lines 27 through 30 for this student.
CAU	you complete lines 27 through 30 for this student, don't	ifetime learning credit for the <b>same student</b> in the same year. If complete line 31.
	American Opportunity Credit	
27	Adjusted qualified education expenses (see instructions). Do	
28	• • •	28
29	Multiply line 28 by 25% (0.25)	
30	If line 28 is zero, enter the amount from line 27. Otherwise,	
	enter the result. Skip line 31. Include the total of all amounts the Lifetime Learning Credit	rom all Parts III, line 30, on Part I, line 1 .   30
24	*	ude the total of all amounts from all Parts
31	Adjusted qualified education expenses (see instructions). Inc	ude the total of all amounts from all Parts   31   100.858.

### 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

SRIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI

Your taxpayer identification number 393-57-6261

**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	(c) Qualified busines income or (loss)	
i				
ii				
iii				
iv				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2		
3 4 5	Qualified business net (loss) carryforward from the prior year	3 (	5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	<b>6</b> 1.	3	
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 1.		
9	· · · · · · · · · · · · · · · · · · ·		9	0.
10	Qualified business income deduction before the income limitation. Add lines 5 an	1	10	0.
11	Taxable income before qualified business income deduction (see instructions)	<b>11</b> 65,161.		
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	<b>12</b> 31.		
13	Subtract line 12 from line 11. If zero or less, enter -0	<b>13</b> 65,130.		12 006
14	Income limitation. Multiply line 13 by 20% (0.20)		14	13,026.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also the applicable line of your return (see instructions)		15	0.
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 zero, enter -0-	nd 7. If greater than	17	( 0.)

(Rev. November 2023)

Department of the Treasury

### Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC), Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074 For tax year **20** \_ 23

Attachment

Sequence No. 70 Internal Revenue Service Taxpayer name(s) shown on return Taxpayer identification number SRIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI 393-57-6261 Preparer's name Preparer tax identification number SYAM PRIYA RAM SAGAR GUPTA TALLAM **Due Diligence Requirements** Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I-V for the benefit(s) claimed (check all that apply). ☐ EIC X CTC/ACTC/ODC ☐ AOTC ☐ HOH Did you complete the return based on information for the applicable tax year provided by the taxpayer No N/A × If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC 2 worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 8812 (Form 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit X Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following. • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status. · Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes." X Did you make reasonable inquiries to determine the correct, complete, and consistent information? . Did you contemporaneously document your inquiries? (Documentation should include the questions you asked, whom you asked, when you asked, the information that was provided, and the impact the information had on your preparation of the return.) Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure List those documents provided by the taxpayer, if any, that you relied on: Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year? . . . (If credits were disallowed or reduced, go to question 7a; if not, go to question 8.) 

If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and 

orm 88	867 (Rev. 11-2023)			Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	Yes	No	N/A
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?			
Part		claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	×		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?	×		
Part			Part \	/.)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the quatuition and related expenses for the claimed AOTC?	alified	Yes	No
Part			Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax and provided more than half of the cost of keeping up a home for the year for a qualifying person?		Yes	No
Part	VI Eligibility Certification			
	You will have complied with all due diligence requirements for claiming the applicable credit(s) and on the return of the taxpayer identified above if you:	or HO	H filing	status
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's respoint your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(status and to figure the amount(s) of the credit(s);	nses on s) and/c	the ret or HOH	urn or filing
	<ul> <li>B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checkled credit(s) claimed and HOH filing status, if claimed;</li> </ul>	ist for a	ny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 880 Document Retention.	37 instru	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	<ol><li>Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).</li></ol>	's eligib	ility for	the
	<ol><li>A record of how, when, and from whom the information used to prepare this form and the applical obtained.</li></ol>	ble work	ksheet(	s) was
	5. A record of any additional information you relied upon, including questions you asked and the taxle determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount of the taxles of the credit o	oayer's int(s) of	respon the cre	ses, to dit(s).
	If you have not complied with all due diligence requirements, you may have to pay a penalty for eac related to a claim of an applicable credit or HOH filing status (see instructions for more information	h failur ).	e to co	mply
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct complete?		Yes	No

Department of the Treasury

### **Passive Activity Loss Limitations**

See separate instructions.

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

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

OMB No. 1545-1008 Attachment

Sequence No. 858 Internal Revenue Service Name(s) shown on return Identifying number SRIDHAR B KONDAMUDI & TULASI PRIYA KONDAPALLI 393-57-6261 Part I 2023 Passive Activity Loss Caution: Complete Parts IV and V before completing 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 amount from Part IV, column (a)) . . . **b** Activities with net loss (enter the amount from Part IV, column (b)) . . . . 1b 10,083. c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . . 1d -10,083. **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a)) . . . **b** Activities with net loss (enter the amount from Part V, column (b)) . . . . 2b c Prior years' unallowed losses (enter the amount from Part V, column (c)) . 2c ( 2d Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules 3 -10,083. If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. Enter the **smaller** of the loss on line 1d or the loss on line 3 . . . . . . . 4 10,083. 5 Enter \$150,000. If married filing separately, see instructions . . . . . . 150,000. 6 Enter modified adjusted gross income, but not less than zero. See instructions 103,644. Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 7 46,356. Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 8 23,178. Enter the **smaller** of line 4 or line 8. If line 3 includes any CRD, see instructions . . . . . . . . . . 10,083. **Total Losses Allowed** Part III 10 10 0. Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find 10,083. 11 Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Part IV Overall gain or loss Current year Prior years Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) (line 1b) loss (line 1c) 0. 10,083. 10,083. RAJUPALEM VILLAGE

10,083.

Total. Enter on Part I, lines 1a, 1b, and 1c

Form 8582 (2023) Page **2** 

Part V Complete This Part Before	e Part I, Lines 2	a, 2b,	and 2c. S	See instruc	ctions.			
Name of activity	Curre	nt year		Prior y	ears	ears Overall		ain or loss
Name of activity	(a) Net income (line 2a)		Net loss ne 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 I	Part II,	, <b>Line 9.</b> S	ee instruc	tions.			I
Name of activity	Form or schedule and line number to be reported on (see instructions)	(а	) Loss	<b>(b)</b> Ra	atio	(c) Special allowance		(d) Subtract column (c) from column (a).
RAJUPALEM VILLAGE	E Ln 22		10,083.	1.0000	0000	10,08	3.	0.
Total			10,083.	1.0	0	10,08	3.	0.
Part VII Allocation of Unallowed L	.osses. See instr	uction	S.					
Name of activity	Form or sch and line nur to be reporte (see instruct	mber ed on	(a) l	Loss	(b) Ratio		(c) Unallowed los	
Total						1.00		
Part VIII Allowed Losses. See instru	uctions.							
Name of activity	Form or sch and line nu to be report (see instruct	nber ed on	(a) l	(a) Loss		(b) Unallowed loss		c) Allowed loss
<del>-</del>								
Total			1		1		1	