Form 8879
(Rev. January 2021)
Department of the Treasury

Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

T.....

Тахрау	ver's name	Social sec	urity numl	ber
LAK	SHMI PRASANNA MERUGUMALA	747-1	2-336	8
Spouse	o's name	Spouse's	social sec	urity number
Par	Tax Return Information – Tax Year Ending December 31, 2023 (E	nter year you	ı are au	thorizing.)
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.			
1	Adjusted gross income		1	67,176.
2	Total tax		2	7,033.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	6,196.
4	Amount you want refunded to you		4	
5	Amount you owe			837.
Part	Taxpayer Declaration and Signature Authorization (Be sure you get an	nd keep a co	onv of v	our return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

			FBO firm name		Er
X	l authorize	GLOBAL TAXES	LLC	to enter or generate my PIN	

2	3	3	6	8	
Ent don	er fiv n't er	ve di Iter a	gits, all ze	but ros	as my

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signatur	re 🕨 🛛 Da	te 🕨	•							
	Practitioner PIN Method Returns Only—continue	bel	ow							
Part III Certi	ification 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		 	0 all ze	 2	7	1	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >		Date 🕨	
	O Must Retain This Form — See it This Form to the IRS Unless F		
For Demonstration Act Nation and service	the sector and the state of the sec		Form 8870 (Day, 01 0001)

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		turn	202	3	OMB No. 1545-	-0074	IRS Use	Only—I	Do not w	rite or sta	ple in this spa	ice.
For the year Jar	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	5	See sep	oarate i	nstructions	s.
Your first name	and m	iddle initial	Last r	name						Y	our so	cial sec	urity numbe	ər
LAKSHMI	PRAS	SANNA	MER	UGUMAI	A						747	12	3368	
		s first name and middle initial	Last r										security nu	mber
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.	F	Preside	ntial Ele	ction Camp	baign
8404 WA	RREN	PARKWAY						1	723				ou, or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	te	ZIP co	ode			0.	ointly, wan d. Checkin	
Frisco						ТΣ	ζ	750	34		0		not change	0
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal co	ode y	our tax	or refu		
												Yo	u 🗌 Sp	ouse
Filing Status	; 🛛	Single					Head of ho	ouseh	old (HOH	I)				
Check only		Married filing jointly (even if only o	ne hac	d income)			_							
one box.		Married filing separately (MFS)					Qualifying				,			
		ou checked the MFS box, enter the			pouse. If you	ı che	ecked the HOH	l or QS	SS box, e	enter	the chi	ld's na	me if the	
	qu	alifying person is a child but not you	ur depe	endent:										
Digital	At ar	ny time during 2023, did you: (a) rec	eive (a	s a reward	d, award, or	payr	ment for prope	rty or :	services)	; or (b) sell,			
Assets	exch	hange, or otherwise dispose of a dig	ital ass	set (or a fi	nancial inter	est ir	n a digital asse	t)? (Se	e instruc	ctions	.)	🗌 Ye	es 🛛 No	,
Standard	Som	eone can claim: 🗌 You as a de	pende	ent 🗌	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	1							
Age/Blindnes	s You:	: 🗌 Were born before January 2, 1	959	Are b	lind Spo	ouse	: 🗌 Was bor	n befc	ore Janua	ry 2,	1959		blind	
Dependent	s (see	instructions):		(2)	Social security	,	(3) Relationsh	ip (4) Check th	ne box	if qualit	fies for (see instructi	ons):
If more	(1) F	irst name Last name		.,	number		to you		Child ta	ax crec	dit	Credit fo	r other depen	dents
than four														
dependents, see instruction														
and check	. <u> </u>													
here														
Income	1a	Total amount from Form(s) W-2, b			,						1a		74,40	0.
Attach Form(s)	b	Household employee wages not re	•		. ,						1b	_		
W-2 here. Also	С	Tip income not reported on line 1a	•						• •		1c			
attach Forms W-2G and	d	Medicaid waiver payments not rep			, ,	nstru	ictions)	• •	• •		1d			
1099-R if tax	e	Taxable dependent care benefits f						• •	• •		1e			
was withheld.	f	Employer-provided adoption bene			,			• •			1f			
lf you did not get a Form	g	Wages from Form 8919, line 6 .				• •		• •	• •	• •	1g			0.
W-2, see	h :	Other earned income (see instruct		· · ·		• •	· · · · ·	· ·	• •		1h			0.
instructions.	i	Nontaxable combat pay election (s Add lines 1a through 1h	see ms	structions)		• •	🔲				1.7		74,40	0
Attach Sol- D	 2a	Ŭ I	2a		· · · ·	 	axable interest	• •	• •	• •	1z 2b		4,82	
Attach Sch. B if required.	za 3a	· · -	2a 3a		106.		ordinary divider		• •	• •	20 3b			6.
	<u>4a</u>		4a				axable amount				4b		±0	
Standard			5a				axable amount				-10 5b			
• Single or	6a		6a				axable amount				6b			
Married filing	c	If you elect to use the lump-sum e		method	check here					. n				
separately, \$13,850	7	Capital gain or (loss). Attach Sche				•				. 🗆	7		-5	6.
 Married filing jointly or 	8	Additional income from Schedule									8		-12,10	
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	,								9		67,17	
\$27,700	10	Adjustments to income from Sche		-							10			
 Head of household, 	11	Subtract line 10 from line 9. This is									11		67,17	6.
\$20,800 • If you checked	12	Standard deduction or itemized	-	-	-						12		13,85	
any box under	13	Qualified business income deduct	ion fro	m Form 8	995 or Form	899	5-A				13			
Standard Deduction,	14	Add lines 12 and 13									14		13,85	0.
see instructions.	15	Subtract line 14 from line 11. If zer	ro or le	ess, enter	-0 This is y	ourt	taxable incom	е.			15		53,32	6.
													1010	

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check if a	any from Form	(s): 1 🗌 881	4 2 4972	3		16	7,033.
Credits	17	Amount from Schedule 2, line 3	3					17	
	18	Add lines 16 and 17						18	7,033.
	19	Child tax credit or credit for oth	ner dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, line 8	в					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If	zero or less,	enter -0				22	7,033.
	23	Other taxes, including self-emp	oloyment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is yo	ur total tax					24	7,033.
Payments	25	Federal income tax withheld from							
-	а	Form(s) W-2				25a	6,196.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c .						25d	6,196.
If you have a	26	2023 estimated tax payments a	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 S	Schedule 8812			28			
	29	American opportunity credit fro	om Form 8863	8, line 8		29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line	15			31			
	32	Add lines 27, 28, 29, and 31. T	hese are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. The	se are your to	tal payments				33	6,196.
Refund	34	If line 33 is more than line 24, s	subtract line 2	4 from line 33.	This is the amou	int you overpaid		34	
	35a	Amount of line 34 you want ref	funded to you	I. If Form 8888	is attached, che	ck here	🗆	35a	
Direct deposit?	b	Routing number X X X X	X X X X	XX	c Type:	Checking	Savings		
See instructions.	d	Account number X X X X	X X X X	X X X Z	x x x x x	XX			
	36	Amount of line 34 you want ap	plied to your	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24. T	his is the amo	ount you owe.					
You Owe		For details on how to pay, go t	o www.irs.gov	//Payments or	see instructions			37	837.
	38	Estimated tax penalty (see inst	ructions) .			38			
Third Party	Do	you want to allow another p	erson to disc	cuss this retu	n with the IRS?	See			
Designee	ins	structions				🗌 Yes. 🤇	Complete b	celow.	X No
	De na	signee's		Phone no.			sonal identi [.] nber (PIN)	fication	
0:		der penalties of perjury, I declare that					. ,	ho host	of my knowledge and
Sign		ief, they are true, correct, and comple							
Here	Yo	ur signature		Date	Your occupation		If the	IRS ser	nt you an Identity
				2410					IN, enter it here
Joint return?					SOFTWARE	ENGINEER	(see	inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, bot	h must sign.	Date	Spouse's occupat	tion			nt your spouse an
your records.								tity Prote inst.)	ection PIN, enter it here
-				Email addraga			(,	
		one no. (425)623-2579 eparer's name P	reparer's signat	Email address	PMERUGUMAL	A18@GMAIL.C			Check if:
Paid			- - - - - - - - - - -		גיייניוט מגנ			2702	Self-employed
Preparer				A RAM SAU	GAR GUPTA	04/14/2024			
Use Only		m's name GLOBAL TAXE			T 00016				678)965-9522
		m's address 245 ROONEY		INSWICK NO			Firm	's EIN	84-3171965
GO TO WWW.Irs.go	ov/Forn	n1040 for instructions and the latest i	ntormation.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury Internal Revenue Service

Additional Income and Adjustments to Income

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. 01

	Name(s) she	own on Form 1	040, 1040-SR, or 1040-NR	Your social security number
	LAKSHMI	PRASANNA	MERUGUMALA	747-12-3368
1	Dart I	Additiona	Income	

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. Attac		5	-12,102.
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		8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е		8e		
f		8f		
g		8g		
h		8h		
i		8i		
j		8j		
k		8k		
I	Income from the rental of personal property if you engaged in the rental			
		81		
m	Olympic and Paralympic medals and USOC prize money (see			
		3m		
n		8n		
0		80		
р		8p		
q		8q		
r		8r	_	
S	Nontaxable amount of Medicaid waiver payments included on Form	,		
		8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or	_		
		8t	_	
u		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			10 100
	1040, 1040-SR, or 1040-NR, line 8		10	-12,102.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedul	e 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	s government		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
с	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
 a	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the		-	
D	rental of personal property engaged in for profit			
с	Nontaxable amount of the value of Olympic and Paralympic medals		-	
C	and USOC prize money reported on line 8m			
d			-	
	Repayment of supplemental unemployment benefits under the Trade		-	
е	Act of 1974			
			-	
f			-	
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)		-	
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		-	
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:			
	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. Enter	er here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	<u></u>	26	
	BAA REVO)3/07/24 PRO	Schedule 1 (F	orm 1040) 202

SCHEDULE	В
(Form 1040)	

Department of the Treasury

Interest an	d Ordinary	Dividends
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OMB No. 1545-0074 6

Attachment

Attach to Form 1040 or 1040-SR.

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

Internal Revenue Service Sequence No. 08 Your social security number Name(s) shown on return 747-12-3368 LAKSHMI PRASANNA MERUGUMALA Amount Part I List name of payer. If any interest is from a seller-financed mortgage and the 1 buyer used the property as a personal residence, see the instructions and list this Interest interest first. Also, show that buyer's social security number and address: (See instructions DIGITAL FEDERAL CREDIT UNION 40. and the 7. Robinhood Securities LLC Instructions for 4,781. Form 1040, CAPITAL ONE N.A. line 2b.) Note: If you received a Form 1099-INT. 1 Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form. 2 4,828. 2 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815..... 3 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b 4 4 4,828. Note: If line 4 is over \$1,500, you must complete Part III. Amount 5 List name of payer: 106. Robinhood Securities LLC Part II Ordinary **Dividends** (See instructions and the Instructions for Form 1040, 5 line 3b.) Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary 6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b 6 106. dividends shown on that form. Note: If line 6 is over \$1,500, you must complete Part III. Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. Foreign Accounts Yes No and Trusts 7a At any time during 2023, did you have a financial interest in or signature authority over a financial Caution: If account (such as a bank account, securities account, or brokerage account) located in a foreign required, failure to × file FinCEN Form If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial 114 may result in substantial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 penalties. and its instructions for filing requirements and exceptions to those requirements Additionally, you If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the may be required b to file Form 8938, financial account(s) is (are) located:

.____ Specified Foreign Financial Assets. 8 During 2023, did you receive a distribution from, or were you the grantor of, or transferor to, a See instructions. foreign trust? If "Yes," you may have to file Form 3520. See instructions .

REV 03/07/24 PRO

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

Statement of

Х

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

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

Your social security number

20

Attachment

Name(s) shown on return

Department of the Treasury

Internal Revenue Service

LAKSHMI PRASANNA MERUGUMALA

747-12-3368

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss f		(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, P line 2, column	art I,	combine the result 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	1,029.	543.	-	19.	505.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	14.	575.			-561.
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 (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	usts from	5			
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	-	6	()		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-56.

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 lines below. This form may be easier to complete if you round off cents to		(d) Proceeds (sales price)	Proceeds Cost		ts from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
	e dollars.	(sales price)		Form(s) 8949, I line 2, colum		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					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
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			
12	Net long-term gain or (loss) from partnerships, S corporat	dule(s) K-1	12			
13	Capital gain distributions. See the instructions		13			
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	-	14	()		
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•			15	

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 –56.
	• 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 line 22.	
	• 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?	
	\Box 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.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 (56.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

BAA REV 03/07/24 PRO

Schedule D (Form 1040) 2023

8949

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.



Go to www.irs.gov/Form8949 for instructions and the latest information.

Name(s) shown on return	Social security number or taxpayer identification number
LAKSHMI PRASANNA MERUGUMALA	747-12-3368

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

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

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

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

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

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

C) Short-term transactions not reported to you on Form 1099-B

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 co	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 <i>Column</i> (e) in the separate instructions.	(f) (g) Code(s) from Amount of instructions adjustment		from column (d) and combine the result with column (g).	
Robinhood Securities LLC	01/01/23	12/31/23	1,029.	543.	W	19.	505.	
2 Totals. Add the amounts in column negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box A	lude on your 1e 2 (if Box B	1,029.	543.		19.	505.		

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

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

8949

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.



Go to www.irs.gov/Form8949 for instructions and the latest information.

Name(s) shown on return	Social security number or taxpayer identification number
LAKSHMI PRASANNA MERUGUMALA	747-12-3368

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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

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 co	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 <i>Column (e)</i> 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	14.	575.			-561.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	lude on your 1e 2 (if Box B	14.	575.			-561.		

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

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

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-										2() 23			
	partment of the Treasury Attach to Form 1040, 1040-SR, 1040-NR, or 1041. gental Revenue Service Go to www.irs.gov/ScheduleE for instructions and the latest information.											Attachn	nent ice No. 13	
	shown on return						moure					Your soci	al security	
. ,	HMI PRASAN	NA	MER	UGUMALA	A								2-3368	
Part			oss I	From Re	ental Rea	I Estate an	d Rov	valties				1		
	Note: If yo	u are i	n the	business of	of renting pe	ersonal proper			c . See	e instru	ictions. If you	are an indi	vidual, rep	ort farm
-						ge 2, line 40.			0000	<u> </u>				
)id you make ar													_
	"Yes," did you												re	
1a	Physical addr	ess of	t eac	n propert	y (street, c	ity, state, ZIH	, code	e)						
A	7/6-1 CHI	NNA I	MAS	IDU CEN	NTER GUI	DIVADA AN	IDHRA	A PRADE	SH	IN 5	12301			
<u> </u>														
<u>C</u>														
1b	Type of Prope (from list below					estate prope				Fa	air Rental		al Use	QJV
_		v)				mber of fair i Check the Qu			•		Days	Da	0	
 	3		i	f you mee	et the requi	irements to f	ile as	a	A B		365		0	
C			C	qualified j	oint ventur	e. See instru	ctions	s	C					
	of Property:													
	Single Family R	esider	nce	3 Va	cation/Sho	rt-Term Rent	tal	5 Land		7	Self-Renta	I		
	Multi-Family Re			4 Co	mmercial			6 Roya	lties	8	Other (des	cribe)		
	_							-			Proper			
Incom	•								Α		B			С
3	Rents received	1					3			324.				•
4	Royalties rece						4							
Expen							-							
5							5							
6	Auto and trave						6							
7	Cleaning and r	nainte	enanc	e			7		1,2	236.				
8	Commissions						8							
9	Insurance .						9							
10	Legal and othe						10							
11	Management f						11		1,0)41.				
12	Mortgage inter	•				,	12							
13	Other interest						13		1 0	0.4				
14 15	Repairs Supplies						14 15			394. 336.				
16	Taxes						16		Ξ,Ο	550.				
17	Utilities						17		2.8	331.				
18	Depreciation e						18			588.				
19	Other (list)			-			19							
20	Total expense						20		12,4	126.				
21	Subtract line 2	0 from	n line	3 (rents)	and/or 4 (r	royalties). If								
	result is a (loss													
	file Form 6198						21		-12,1	102.				
22	Deductible rer							(10 -	· · ·			(
00-	on Form 8582						22		12,1		()	(
23a b	Total of all among Total of all among								•	23a 23b		324.		
b c	Total of all am							· · ·		23D 23C				
d	Total of all am									23d		3,588.		
e	Total of all am									23e		2,426.		
24	Income. Add										· · · · ·	. 24		
25	Losses. Add ro							•		Inter to	otal losses he	ere 25	(12,102.
26	Total rental re													
	here. If Parts I	I, III, a	and I	V, and lin	ne 40 on pa	age 2 do no	t appl	y to you,	also e	enter t	his amount	on		

For Paperwork Reduction Act Notice, see the separate instructions.

26

-12,102.

-12,102.

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