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

Internal Revenue Service Go to www.irs.gov/Formoo79 for the latest informati	ion.
Submission Identification Number (SID)	
Taxpayer's name	Social security number
VINAY KUMAR NANDALA	676-76-3924
Spouse's name	Spouse's social security number
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.	(Enter year you are authorizing.)
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1 Adjusted gross income	1 98,475.
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	-
4 Amount you want refunded to you	
5 Amount you owe	- · · · · · · · · · · · · · · · · · · ·
Part II Taxpayer Declaration and Signature Authorization (Be sure you get	-
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or an	
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authoriz Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accorpayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial is authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amendation for the income tax return (original or amendati	In for rejection of the transmission, (b) the reason to the U.S. Treasury and its designated Financia bunt indicated in the tax preparation software for institution to debit the entry to this account. This erminate the authorization. To revoke (cancel) a ion requests must be received no later than 2 d in the processing of the electronic payment of the payment. I further acknowledge that the
Electronic Funds Withdrawal Consent.	
Taxpayer's PIN: check one box only	6 3 9 2 4
X I authorize GLOBAL TAXES LLC to enter or get	nerate my PIN Lenter five digits, but
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.	
Your signature ► Vinay Kumar Nandala Da	ate ▶04/12/2024
\mathcal{U}	
Spouse's PIN: check one box only	
Lauthorize ERO firm name to enter or ger	
signature on the income tax return (original or amended) I am now authorizing.	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.	
Spouse's signature ▶ Da	ate ►
Practitioner PIN Method Returns Only—continue	below
Part III Certification and Authentication — Practitioner PIN Method Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 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 individual included above to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I ar requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the Practition in	m submitting this return in accordance with the
EDO's signature N	do N
	ate >
ERO Must Retain This Form — See Instruction	ONS

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

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

20**23** OMB No. 1545-0074

For the year Jar	n. 1–Dec	. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20	See sep	parate instructions.
Your first name	and mi	ddle initial	Last n	name				Your so	cial security number
VINAY K	JMAR		NAN	DALA				676	76 3924
		first name and middle initial	Last n					1	s social security number
Home address	(numbe	er and street). If you have a P.O. box, se	e instruc	tions.			Apt. no.	Presider	ntial Election Campaign
109 STO	NE DI	RIVE							ere if you, or your
City, town, or p	oost offi	ce. If you have a foreign address, also c	omplete	spaces below.	Stat	e	ZIP code		if filing jointly, want \$3 this fund. Checking a
MECHANI	CSBUI	RG			PA		17050		w will not change
Foreign countr	y name			Foreign province/state/o	count	y	Foreign postal code	your tax	or refund.
									You Spouse
Filing Status	s X	Single				Head of ho	ousehold (HOH)		
Check only		Married filing jointly (even if only o	one had	l income)		_			
one box.		Married filing separately (MFS)					surviving spouse		
		ou checked the MFS box, enter the			ı che	cked the HOH	l or QSS box, ent	er the chil	d's name if the
	qu	alifying person is a child but not yo	ur depe	endent:					
Digital	At ar	ny time during 2023, did you: (a) red	ceive (as	s a reward, award, or	payn	nent for prope	rty or services); o	r (b) sell,	
Assets		ange, or otherwise dispose of a dig							☐ Yes ☒ No
Standard	Som	eone can claim:	epende	nt	e as a	a dependent			
Deduction		Spouse itemizes on a separate retu	rn or yo	ou were a dual-status	alien				
Ago/Blindnes	e Vou	Were born before January 2,	1050	Are blind Spo	ouse:	□ Was bor	n before January	2 1050	☐ Is blind
		-	1333	<u></u>			(A) Chook the h		ies for (see instructions):
Dependent		instructions): irst name Last name		(2) Social security number	'	(3) Relationsh to you	Child tax		Credit for other dependents
If more than four	(1)1	Last name		Hamber		10 you		5.00.1	
dependents,									
see instruction	s								
and check here [1								
	 1a	Total amount from Form(s) W-2, I	nox 1 (s	ee instructions)				. 1a	112,886.
Income	b	Household employee wages not	,	,				. 1b	112,000.
Attach Form(s) W-2 here. Also	c	Tip income not reported on line 1	-					. 1c	
attach Forms	d	Medicaid waiver payments not re	•	•				. 1d	
W-2G and	e	Taxable dependent care benefits	•	` ,				. 1e	
1099-R if tax was withheld.	f	Employer-provided adoption ben		·				. 1f	
If you did not	g	M						. 1g	
get a Form	h	Other earned income (see instruc						. 1h	0.
W-2, see instructions.	i	Nontaxable combat pay election	see ins	structions)		1i			
	z	Add lines 1a through 1h						. 1z	112,886.
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest		. 2b	2.
if required.	3a	Qualified dividends	3a	8.	b O	rdinary divider	nds	. 3b	16.
	4a	IRA distributions	4a		b Ta	axable amount	t	. 4b	
Standard Deduction for —	5a	Pensions and annuities	5a		b Ta	axable amount	t	. 5b	
Single or	6a	Social security benefits	6a		b Ta	axable amount	t	. 6b	
Married filing separately,	С	If you elect to use the lump-sum	election	method, check here ((see i	nstructions)			
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche	edule D					□ <u>7</u>	-3,000.
jointly or	8	Additional income from Schedule						. 8	-11,429.
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	7, and 8	s. This is your total inc	come			. 9	98,475.
\$27,700 Head of	10	Adjustments to income from Scho						. 10	
household,	11	Subtract line 10 from line 9. This	-	-				. 11	98,475.
\$20,800 If you checked	12	Standard deduction or itemized						. 12	13,850.
any box under Standard	13	Qualified business income deduc	tion fro	m Form 8995 or Form	8995	5-A		. 13	2.
Deduction,	14	Add lines 12 and 13						. 14	
see instructions.	15	Subtract line 14 from line 11. If ze	ero or le	ss, enter -0 This is y	our t a	axable incom	e	. 15	84,623.

,	3)			Page
ax and	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🗀 4972 3 🗀	. 16	13,925.
Credits	17	Amount from Schedule 2, line 3	. 17	
	18	Add lines 16 and 17	. 18	13,925.
	19	Child tax credit or credit for other dependents from Schedule 8812	. 19	
	20	Amount from Schedule 3, line 8	. 20	
	21	Add lines 19 and 20	. 21	
	22	Subtract line 21 from line 18. If zero or less, enter -0	. 22	13 , 925.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	. 23	0.
	24	Add lines 22 and 23. This is your total tax	. 24	13,925.
ayments	25	Federal income tax withheld from:		
•	а	Form(s) W-2	8.	
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	. 25d	15 , 428.
ou have a	26	2023 estimated tax payments and amount applied from 2022 return	. 26	
alifying child,	27	Earned income credit (EIC)		
ach Sch. EIC.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits .	. 32	
	33	Add lines 25d, 26, and 32. These are your total payments	. 33	15,428.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid .	. 34	1,503.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here [35a	1,503.
irect deposit?	b	Routing number 0 3 1 2 0 2 0 8 4 c Type: X Checking Saving	gs	
ee instructions.	d	Account number 3 8 3 0 1 5 8 3 1 5 8 3		
	36	Amount of line 34 you want applied to your 2024 estimated tax		
Mount	37	Subtract line 33 from line 24. This is the amount you owe .		
ou Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	. 37	
	38	Estimated tax penalty (see instructions)		
hird Party Sesignee		you want to allow another person to discuss this return with the IRS? See structions	ete below.	⊠ No
-		signee's Phone Personal id		
	naı	me no. number (Pl	N)	

 Preparer Use Only
 Firm's name
 GLOBAL TAXES LLC
 Phone no. (678) 965-9522

 Firm's address
 245 ROONEY CT E BRUNSWICK NJ 08816
 Firm's EIN 84-3171965

 Go to www.irs.gov/Form1040 for instructions and the latest information.
 BAA
 REV 03/07/24 PRO
 Form 1040 (2023)

Email address

Date

Preparer's signature

SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA

Joint return?

Paid

See instructions.

Keep a copy for your records.

Phone no.

Preparer's name

Spouse's signature. If a joint return, both must sign.

(302) 229-4084

SOFTWARE ENGINEER

NANDALA.VINAY@GMAIL.COM

Date

04/11/2024

Spouse's occupation

Protection PIN, enter it here

If the IRS sent your spouse an Identity Protection PIN, enter it here

Check if:

Self-employed

(see inst.)

(see inst.)

P02082703

PTIN

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

VINAY KUMAR NANDALA

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

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

	Attachment Sequence No. 01
Your soc	ial security number
676-76	-3924

Par	t I Additional Income						
1	Taxable refunds, credits, or offsets of state and local income taxes		1				
2a	Alimony received						
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	ach Schedule E .	5	-11,429.			
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					
I	Income from the rental of personal property if you engaged in the rental						
	for profit but were not in the business of renting such property	81					
m	Olympic and Paralympic medals and USOC prize money (see						
	instructions)	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	_				
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:						
_	Title of the control	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			11 100			
	1040, 1040-SR, or 1040-NR, line 8		10	-11,429.			

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 govern	ment		
	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	t t	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)			
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 here are			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	

SCHEDULE D (Form 1040)

Capital Gains and Losses

Attach to Form 1040, 1040-SR, or 1040-NR. Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/ScheduleD for instructions and the latest information. Name(s) shown on return Your social security number 676-76-3924 VINAY KUMAR NANDALA Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2. column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . 1b Totals for all transactions reported on Form(s) 8949 with 9,720. 109. 5,466. -4,145. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -4,145.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 (g) (h) Gain or (loss) Adjustments Subtract column (e) (d) (e) lines below Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2, column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with 1,945. 921. -1,024.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 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III -1,024.15

Page 2 Schedule D (Form 1040) 2023

Part III Summary

16	Combine lines 7 and 15 and enter the result	16		-5,169.
	• 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? Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.			
	No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
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	(3,000.)
	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.			
	RΔΔ REV 03/07/24 PRO	Scl	nedule D (For	m 1040) 2023

Sales and Other Dispositions of Capital Assets

Department of the Treasury Internal Revenue Service

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.

Attachment Sequence No. 12A

OMB No. 1545-0074

Name(s) s	shown	on	return	
-----------	-------	----	--------	--

VINAY KUMAR NANDALA

Social security number or taxpayer identification number

676-76-3924

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

Part I

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

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

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

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

 ☐ (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS ☐ (C) Short-term transactions not reported to you on 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	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate 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	01/01/23	12/31/23	4,076.	4,935.	W	16.	-843.	
ROBINHOOD CRYPRO LLC	01/01/23	12/31/23	502.	501.			1.	
Apex Clearing	01/01/23	12/31/23	191.	371.	W	93.	-87.	
Apex Clearing	01/01/22	12/31/23	697.	3,913.			-3,216.	
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 A)	al here and inc is checked), li i	lude on your ne 2 (if Box B	5 466	0 720		100	_/ 1/15	

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

Form 8949 (2023) Attachment Sequence No. 12A Pag

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

VINAY KUMAR NANDALA

Social security number or taxpayer identification number

676-76-3924

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.

(E) Long-tern	(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (F) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (F) Long-term transactions not reported to you on Form 1099-B								
1	(a) n 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: 10	0 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 SECU	RITIES LLC	01/01/22	12/31/23	921.	1,945.			-1,024.	
2 Totals. Add the an negative amounts) Schedule D, line 8 above is checked),	. Enter each tota b (if Box D above	al here and inc e is checked), lir	lude on your ne 9 (if Box E	921.	1,945.			-1,024.	

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

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

2023
Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Your social security number VINAY KUMAR NANDALA 676-76-3924 **Income or Loss From Rental Real Estate and Royalties** Part I Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions В 1a Physical address of each property (street, city, state, ZIP code) QUTHBULLAPUR HYDERABAD TELANGANA IN 500070 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Days** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. C C Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties Properties: Α В C Income: 634. 3 Rents received 4 Royalties received . 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 7 1,854. Cleaning and maintenance . . . 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 2,510. 12 12 Mortgage interest paid to banks, etc. (see instructions) 13 13 14 2,445. 14 Repairs 15 15 3,410. Supplies 16 16 Taxes 17 Utilities 17 1,844. 18 18 Depreciation expense or depletion 19 19 Other (list) 20 20 12,063. Total expenses. Add lines 5 through 19 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 -11,429. file Form 6198 21 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 11,429. 22 634. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b 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 e Total of all amounts reported on line 20 for all properties . 23e 12,063. 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 11,429. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

-11,429.

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

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 returnYour taxpayer identification numberVINAY KUMAR NANDALA676-76-3924

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		(c) Qualified business income or (loss)		
i					
ii			\perp		
iii					
- ""			+		
iv					
V			<u> </u>		
2	Total qualified business income or (loss). Combine lines 1i through 1v,				
•	column (c)	2	_		
3	Qualified business net (loss) carryforward from the prior year	3 (4		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	-		
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5		
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6 8.			
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior	0.	1		
-	year	7 ()		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero				
	or less, enter -0	8 8.			
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	2.	
10	Qualified business income deduction before the income limitation. Add lines 5 an	1	10	2.	
11	Taxable income before qualified business income deduction (see instructions)	11 84,625.			
12	Enter your net capital gain, if any, increased by any qualified dividends				
40	(see instructions)	12 8.	-		
13	Subtract line 12 from line 11. If zero or less, enter -0	13 84,617.	44	16 000	
14	Income limitation. Multiply line 13 by 20% (0.20)		14	16,923.	
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also the applicable line of your return (see instructions)		15	2.	
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			<u>. </u>	
••	zero, enter -0		17 (0.	

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

Internal Revenue Service Name(s) shown on return VINAY KUMAR NANDALA

	Sequence No. 858
Identify	ing number
676-	76-3924

Par							
	Caution: Complete Parts IV a	nd V before compl	eting Part I.				
	I Real Estate Activities With Active Pance for Rental Real Estate Activities			ive participation, s	ee Special		
1a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the Combine lines 1a, 1b, and 1c	ount from Part IV, c he amount from Pa	olumn (b)) art IV, column (c))	1b (0. 11,429.) 	1d	-11,429.
All Ot	her Passive Activities						·
	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the	ount from Part V, co	olumn (b)) art V, column (c))	2b (2c ())	2d	
3	Combine lines 1d and 2d and subtrazero or more, stop here and include prior year unallowed losses entered normally used	this form with you	ur return; all losse Report the losses	es are allowed, inc	luding any	3	-11,429.
Part II.	If line 3 is a loss and: • Line 1d is a • Line 2d is a on: If your filing status is married filing Instead, go to line 10.	loss, go to Part II. loss (and line 1d is separately and yo	zero or more), sk ou lived with your	spouse at any tim	e during the	-	
Par	Special Allowance for Re			•			
	Note: Enter all numbers in Pa	•		tions for an examp	ole.		11 100
4 5 6	Enter the smaller of the loss on line 1 Enter \$150,000. If married filing sepa Enter modified adjusted gross incom Note: If line 6 is greater than or equa on line 9. Otherwise, go to line 7.	rately, see instructi e, but not less thar	ons n zero. See instruc	ctions 6 1	50,000.	4	11,429.
7	Subtract line 6 from line 5			7	40,096.		
8	Multiply line 7 by 50% (0.50). Do not e			•		8	20,048.
9	Enter the smaller of line 4 or line 8. If	line 3 includes any	/ CRD, see instruc	ctions		9	11,429.
Part 10	Total Losses Allowed Add the income, if any, on lines 1a ar	ad 2a and onter the	total			10	0.
11 Part	Total losses allowed from all passis out how to report the losses on your	ve activities for 20 tax return	23. Add lines 9 ar	nd 10. See instruct	ons to find	11	11,429.
rari	Complete This Part Belor	,	· · ·				
	Name of activity	Currer		Prior years	Ove	rall ga	in or loss
		(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gair	1	(e) Loss
QUTE	HBULLAPUR	0.	11,429.				11,429.
Total.	Enter on Part I, lines 1a, 1b, and 1c	0.	11,429.				

Form 8582 (2023) Page **2**

1 01111 0302 (2023)								raye Z
Part V Complete This Part Befo	re Part I, Lines 2	2a, 2b,	and 2c. S	ee instru	ctions.			
Name of activity	Curre	nt year		Prior y	ears Overal		ıll ga	in or loss
Name of activity	(a) Net income (line 2a)		(b) Net loss (line 2b)		llowed ne 2c)	(d) Gain		(e) Loss
Total. Enter on Part I, lines 2a, 2b, and 2c								
Part VI Use This Part if an Amou	nt Is Shown on	Part II,	Line 9. S	ee instru	ctions.			
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) R	atio	(c) Special allowance		(d) Subtract column (c) from column (a).
QUTHBULLAPUR	E Ln 22		11,429.	1.0000	00000	11,42	9.	0.
Total	<u> </u>		11,429.	1.0	0	11,42	9.	0.
Part VII Allocation of Unallowed			IS. ⊤		1			
Name of activity	Form or sch and line nu to be report (see instruc	mber ed on	(a) l	_OSS	(1	b) Ratio	(c)	Unallowed loss
Total						1.00		
Part VIII Allowed Losses. See inst	ructions.							
Name of activity	Form or sch and line nu to be report (see instruc	mber ed on	(a) l	_OSS	(b) Un	allowed loss	(c) Allowed loss
					1			
T - 1 - 1								

PA-40 - 2023

Pennsylvania Income Tax Return

ENTER ONE LETTER OR NUMBER IN EACH BOX (04-23)

			l N	Extensi	on.	N	Amended Return.
676763924			R	Resider	ncy Statu	ıs.	
NANDALA							Part-Year Resident to
VINAY KUMAR	Occupat Occupat	SVI IWARE E	Z	Single,		I/Filing J o Separately	ointly, y, F inal Return
	Occupat	IOII	N	Decease	ed		
			N	Taxpay	er Date	of Death	
			N	Spouse	Date of	Death	
LO9 STONE DRIVE MECHANICSBURG	PΑ	17050	N	Farmers School		Name H A	ARRISBURG CI
302-229-4084		22275	1	Г			
1a Gross Compensation. Do not include qualifying retirement benefits. See the			y and		la		775886
1b Unreimbursed Employee Business E1c Net Compensation. Subtract Line 1b	_	1a.			lb lc		77588P 0
 Interest Income. Complete PA Scheo Dividend and Capital Gains Distribut Net Income or Loss from the Operation 	ions Incom	e. Complete PA Schedule B if 1	equired.		3		0 7P 5
 Net Gain or Loss from the Sale, Exc. Net Income or Loss from Rents, Roy Estate or Trust Income. Complete an Gambling and Lottery Winnings. Co Total PA Taxable Income. Add onl 2,3,4,5,6,7 and 8. DO NOT ADD 	valties, Pate of submit P omplete and y the positi	ents or Copyrights. A Schedule J. I submit PA Schedule T. ive income amounts from Lines	s 1c,		5 6 7 8 9		-5278 0 0 0 0 112904
10 Other Deductions. Enter the appropriate the instructions for additional in	-	for the type of deduction.	N		10		0

1555 REV 02/24/24 PRO



11 **Adjusted PA Taxable Income.** Subtract Line 10 from Line 9.



11

112904

Social Security Number

676763924 Name(s) VINAY KUMAR NANDALA

	39659522			Firm FEIN Preparer's			343171965 PO2082703
•	arer's Name and Telephone Number MM PRIYA RAM SAGAR G	Dat JUPTA D4:	e L124	E-File Opt	Out	N	N
	Signature	Spouse's Signature, if filing jo	ointly	•			
_	ature(s). Under penalties of perjury, I (we) decla panying schedules and statements, and to the best		-				
36	Refund donation line. Enter the organ	nization code and donation amo	unt. See instructions		36		
35	Refund donation line. Enter the organ				35		
34	Refund donation line. Enter the organ				34		
33	Refund donation line. Enter the organ	nization code and donation amo	unt. See instructions	. [33		
32	Refund donation line. Enter the organ	nization code and donation amo	unt. See instructions	.	32		
30	Refund – Amount of Line 29 you wan Credit – Amount of Line 29 you wan			FUND	37 30		0
20	The total of Lines 30 through 36 mu	=	73. T.Y	ETINID	חב		5
	the difference here.						J
28 29	TOTAL PAYMENT DUE. See the in OVERPAYMENT. If Line 24 is more		25 and Line 27, ent	ter	28 29		0
20	_		box. N		٦ ،		_
27	Penalties and Interest. See the instruct	tions. Enter Code: V-1630/REV-1630A, mark the	box N		27		0
26	,						0
25	USE TAX. Due on internet, mail orde	*			25 26		0
24	TOTAL PAYMENTS and CREDIT				24		3466
23	Total Other Credits. Submit your PA S		ule DC.		23		0
22	Resident Credit. Submit your PA Sch	edule(s) G-L and/or RK-1			22		п
21	Tax Forgiveness Credit from Section				51		0
	Total Eligibility Income from Section				50	00	0
	Dependents, Section II, Line 2, PA Sc	-	3 Deceased		19a 19b	00	
	Forgiveness Credit. Submit PA Schoriling Status: 01 Unmarried or S		03 Deceased		10-	0.5	
	Total Estimated Payments and Cree		•		18		Ö
	Nonresident Tax Withheld from your	PA Schedule(s) NRK-1. (Nonr	esidents only)		17		0
15 16	2023 Extension Payment.	. KLV-4JYD IIICIUUCU.	N		7P 72		0
	Credit from your 2022 PA Income Tax 2023 Estimated Installment Payments		B.I		14 15		0
1.4	G 11: 6				7 /-		
13	Total PA Tax Withheld. See the instruc	ctions.			13		3466
12	PA Tax Liability. Multiply Line 11 by	y 3.07 percent (0.0307).			12		3466

Page 2 of 2



PA SCHEDULE A Interest Income

PA-40 A (EX) 03-23 (I) PA Department of Revenue

2023

OFFICIAL USE ONLY

_	
Name (if filing jointly, use name shown first on the PA-40)	Social Security Number (shown first)
VINAY KUMAR NANDALA	676-76-3924

CAUTION: Federal and PA rules for taxable interest income are different. **Read the instructions.**

If your total PA-taxable interest income (taxpayer, spouse and/or joint) is equal to the amount reported on your federal return and you have no amounts for Lines 2 through 15 (not including subtotal Lines 4 and 10) of PA Schedule A, you must report your income on Line 2 of the PA-40, but you do not have to submit PA Schedule A. If there are any amounts (taxpayer, spouse and/or joint) for any of the Lines 2 through 15 (not including subtotal Lines 4 and 10) of the schedule, you must complete and submit PA Schedule A with your PA-40. A taxpayer and spouse must complete separate schedules to report their income if any amounts are reported on Lines 2 through 15 (not including subtotal Lines 4 and 10) of Schedule A. However, if all the income is earned on a joint basis, one schedule may be completed. Complete the oval to indicate whether the income included on the schedule is from the taxpayer, spouse or joint. If a separate PA Schedule A is prepared for a taxpayer and spouse, include only the taxpayer or spouse share of the income for each line.

PA SCHEDULE A - PA-Taxable Interest Income (See the instructions.)

Taxpayer Spouse Joint		
1. Interest income reported on your federal return. See instructions.	1.	\$ 2
2. Tax-exempt interest income included in Line 2a of your federal return.	2.	\$
Other addition adjustments. See instructions. Description:	3.	\$
4. Add Lines 1, 2 and 3.	4.	\$ 2
5. Interest income from federal Schedule(s) K-1. See instructions.	5.	\$
Interest income from direct obligations of the Commonwealth of Pennsylvania and/or its municipalities.	6.	\$
7. Interest income from direct obligations of the U.S. government.	7.	\$ 0
8. Other reduction adjustments. See instructions. Description:	8.	\$
9. Add Lines 5, 6, 7 and 8.	9.	\$ 0
10. Subtract Line 9 from Line 4.	10.	\$ 2
 Distributions from Life Insurance, Annuity or Endowment Contracts included in federal taxable income. 	11.	\$
12. Distributions from Charitable Gift Annuities included in federal taxable income.	12.	\$
 Distributions from IRC Section 529 Qualified Tuition Programs for non-educational purposes. 	13.	\$
14. Distributions from Health/Medical Savings Accounts included in federal taxable income.	14.	\$
15. Interest income from PA S corporations and partnership(s), reported on your PA Schedule(s) RK-1 or federal Schedule(s) K-1.	15.	\$
16. Total PA-Taxable Interest Income. Add Lines 10 through 15. Enter on Line 2 of your PA-40.	16.	\$ 2



PA SCHEDULE B Dividend Income

PA-40 B (EX) 09-23 (I) PA Department of Revenue

2023

OFFICIAL USE ONLY

-	
Name (if filing jointly, use name shown first on the PA-40)	Social Security Number (shown first
VINAY KUMAR NANDALA	676-76-3924

CAUTION: Federal and PA rules for dividend income are different. Read the instructions.

If your total PA-taxable dividend and capital gains distributions income (taxpayer, spouse, and/or joint) is equal to the amount reported on your federal return and does not include any amounts for Lines 2 through 11 (not including subtotal Line 6) of PA Schedule B, you must report your income on Line 3 of the PA-40, but you do not have to submit PA Schedule B. If there are any amounts (taxpayer, spouse, and/or joint) for any of the Lines 2 through 11 (not including subtotal Line 6), you must complete and submit PA Schedule B with your PA-40. A taxpayer and spouse must complete separate schedules to report their income if any amounts are reported on Lines 2 through 11 (not including subtotal Line 6) of Schedule B. However, if all the income is earned on a joint basis, one schedule may be completed. Complete the oval to indicate whether the income included on the schedule is from the taxpayer, spouse, or joint. If a separate PA Schedule B is prepared for a taxpayer and spouse, include only the taxpayer or spouse share of the income for each line.

PA SCHEDULE B - PA-Taxable Dividend and Capital Gains Distributions Income (See the instructions.)

Taxpayer Spouse Joint		
1. Dividend income from Line 3b of your federal return. See instructions.	1.	\$ 16
2. Dividend income from federal Schedule K-1(s). See instructions.	2.	\$
3. Pennsylvania exempt-interest dividend income. See instructions.	3.	\$
Other reduction adjustments. See instructions. Description:	4.	\$
5. Add the amounts on Lines 2, 3, and 4.	5.	\$
6. Subtract Line 5 from Line 1.	6.	\$ 16
7. Total exempt-interest dividends. See instructions.	7.	\$
Other addition adjustments. See instructions. Description:	8.	\$
9. Repatriation of foreign income. See instructions. a. Total earnings and profits included on Line 1 of IRC Section 965 Transition Tax Statement. b. Total payments of earnings and profits included in Line 9a received in prior years. 9b.		
in Line 9a received in prior years. 9b c. Payments of earnings and profits included in Line 9a received in current year.	9c.	\$
10. Capital Gains Distributions - See instructions.	10.	\$
11. Dividend income from PA S corporation(s) and partnerships, reported on your PA Schedule(s) RK-1 or federal Schedule(s) K-1.	11.	\$
12. Total PA-Taxable Dividend Income. Add Lines 6, 7, 8, 9c, 10, and 11. Enter on Line 3 of your PA-40.	12.	\$ 16



5307370057

Sale, Exchange or Disposition of Property

PA-40 D (EX) 03-23 (I) PA Department of Revenue

2023

OFFICIAL USE ONLY

	If you need me	ore space, you m	ay photocopy.		
lame of the taxpayer filing this schedule				Social Security	Number (shown first) - 3924
Taxpayei		Spouse	Joint _)	
mportant: A taxpayer and spouse must comp 0 of PA Schedule D. However, if all the gair dicate whether the gains and losses included ther spouse's gains. When reporting the sale ale on their separate PA Schedule D. Read the roperty, including inherited property. Amounts arefully the instructions concerning intangible	ns and losses were d on the schedule a of jointly owned prop e instructions. Ente s from Federal Sche	realized on a joir re from the taxpay perty that is not reper all sales, exchan- edule D may not be	of basis, one schedul er, spouse or joint. Of corted on a joint PA So ges or other disposition e correct for PA income	le may be completed to spouse may not chedule D, each murons of real or person me tax purposes. N	ed. Complete the oval to use a loss to reduce the st show their share of the lal tangible and intangible
(a) Describe the property: 100 shares of XYZ stock, or 10 acres in Dauphin County	(b) Date acquired: Month/day/year	(c) Date sold: Month/day/year	(d) Gross sales price less expenses of sale	(e) Cost or adjusted basis of the property sold	(f) Gain or loss: (d) minus (e) (If a loss, fill in the oval).
1.ROBINHOOD SECURITIES	01/01/23	12/31/23	4,076.	4,935.	LOSS 859.
ROBINHOOD CRYPRO LLC		12/31/23	502.	501.	LOSS 1.
Apex Clearing		12/31/23	191.	371.	LOSS 180.
Apex Clearing		12/31/23	697.	3,913.	3,216.
ROBINHOOD SECURITIES		12/31/23	921.	1,945.	1,024.
					LOSS LOSS LOSS LOSS LOSS LOSS LOSS LOSS
2. Net gain (loss) from above sales				LOSS 2.	5,278.
3. Gain from installment sales from PA Schedule	D-1	<u></u>		3.	
4. Taxable distributions from C corporations	Enter total	distribution			
		usted basis		= 4.	
5. Net gain (loss) from the sale of 6-1-71 propert					
Net PA S corporation and partnership gain (los axable gain from selling a principal residence. Co	-				gain on Line 7
(a)	(b)	(c)	(d)	(e)	(f)
Address of residence	Date acquire Month/day/y	ed: Date sold:	Gross sales price less expenses of sale	Cost or adjusted basis of the property sold	Gain or loss: (d) minus (e)
Taxable gain from the sale of your principal resile from you realized a gain/loss on the sale of the non-					
8. Taxable distributions from partnerships from R	EV-999	<u></u>	· · · · · · · · · · · · · · · · · · ·	8.	
9. Taxable distributions from PA S corporations from PA S.					
Taxable gain from exchange of insurance cont					
1. Total PA Taxable Gain (Loss). Add Lines 2 th	rough 10. Enter on Lir	ne 5 of your PA-40. (f a net loss, fill in the ov	/al) Loss 11.	5 , 278.



PA SCHEDULE E

Rents and Royalty Income (Loss)

PA-40 E (EX) 03-23 (I)
PA Department of Revenue
of the taxpayer filing this schedule

2023

OFFICIAL USE ONLY

		e taxpayer filing this schedule KUMAR NANDALA	Number (shown first) or EIN -3924				
Sales	Tax Lie	cense Number (if applicable). See the instructions.	Are rental payments i		party broker? Yes No		
of oi	l, gas	structions. Report the income and expenses for the use of your personand other minerals from your property, and the use of your patent minerals from your property or producing products from your patent	ts and copyrights. Note	: If you are in the busine			
SI	ECTI	ON I PROPERTY DESCRIPTION					
Enter	the type	e and complete address of each rental real estate property, and/or each source of roy	alty income. If more than three	properties, submit additional so	:hedules as needed.		
	Туре	Description of Property For Profit Prope	erty Complete Ad	dress (street, city, state ar	nd ZIP code)		
А	3	· · ·	QUTHBULLAPU HYDERABAD,		500070, India		
В		YES					
		NO 🗀					
С		YES —					
		NO 🗀					
Prop	erty t	 ype: 1. Single family residence 2. Multi-family residence 4. Commercial 6. Residence 		al escribe:			
SI	ECTI	ON II INCOME & EXPENSES					
			Property A	Property B	Property C		
	Line	a: Identify the property from Section I and indicate ownership (T/S/J)	\blacksquare T \bigcirc S \bigcirc J	□ T □ S □	J C T C S C J		
	Line	b: Is the property rental location in PA?	YES NO	YES NO	YES NO		
	Line	c: Is the property rented for any period less than 30 days?	YES NO	YES NO	YES NO		
Inco	me:	1. Rent received	63	4			
		2. Royalties received					
Ехре	enses:	3. Advertising					
		4. Automobile and travel					
		5. Cleaning and maintenance	1,85	4			
		6. Commissions					
		7. Insurance					
		8. Legal and professional fees					
		9. Management fees	2,51)			
	1	10. Mortgage interest					
	,	11. Other interest					
	1	12. Repairs	2,44.	5			
	1	13. Supplies	3,41	0			
	1	14. Taxes - not based on net income					
	1	15. Utilities	1,84	4			
	1	16. Depreciation expense - See the instructions					
	1	17. Other expenses (itemize):					
	1	18. Total Expenses - Add Lines 3 through 17	12,06	3			
Inco	me 1	19. Income – Subtract Line 18 from Line 1 or 2	•				
or L	oss: 2	20. Loss – Subtract Line 1 or 2 from Line 18. (fill in the oval, if a net loss) 20.		0 0			
		21. Net Income or Loss - Total Lines 19 and 20 for short-term rentals. See the ins	structions(fill in t	he oval, if a net loss) 2	1.		
	,	22. Net Income or Loss - Total Lines 19 and 20 for non short-term rentals. See the	io inetructione (fill in t	he oval if a not loss)	2 0		
		22. Net income or Loss - Total Lines 19 and 20 for fron short-term remais. See the control of	io instructions (IIII III I	ne oval, il a liet 1055) 2	- U		
		PA Schedule(s) RK-1 or NRK-1.		he oval, if a net loss) 2	3.		
	2	 Net Rent and Royalty Income (Loss). Add Lines 22 and 23. If submitting more the total all Line 22 and 23 amounts and include on Line 6 of your PA-40. 		he oval, if a net loss) 2	Property B Property C T S J T S J YES NO YES		
		,	REV 02/24/24 PR				





PENNSYLVANIA E-FILE SIGNATURE AUTHORIZATION

PA-8879 (EX) 03-23 (I) **2023**

Declaration Control Number/Submission ID		
Primary Taxpayer's Name	Social Security Number	
VINAY KUMAR NANDALA Secondary Taxpayer's Name	676-76-3924 Social Security Number	
Secondary Taxpayer's Inditie	Social Security Number	
SECTION I TAX RETURN INFORMATION – TAX YEAR EN	IDING DEC. 31, 2023 (whole dollars only)	
1. Adjusted PA taxable income (Form PA-40, Line 11)		112,904
2. PA tax liability (Form PA-40, Line 12)		3,466
3. Total PA tax withheld (Form PA-40, Line 13)		3,466
4. Amount to be refunded (Form PA-40, Line 30)		
5. Total payment (tax due) (Form PA-40, Line 28)	5	0
SECTION II DECLARATION AND SIGNATURE AUTHORIZ	ATION OF TAXPAYER	
agents to initiate an electronic funds withdrawal (direct debit) entry to my desinstitution to debit the entry to my account and the financial institutions involve information necessary to answer inquiries and resolve issues related to paymente United States or one of its territories. I have selected a personal identificable, my electronic funds withdrawal consent. PRIMARY TAXPAYER'S PERSONAL IDENTIFICATION NUMBER (PIN) Ma X I authorize GLOBAL TAXES LLC to electronically filed income tax return.	ed in the processing of my electronic payment of tent. I certify the funds for this withdraw are original cation number as my signature for my electron ark one oval only.	taxes to receive confidential ating from an account within ic income tax return and, if
I will enter my PIN as my signature on my tax year 2023 electronically	filed income tax return.	
Signature		Date
SECONDARY TAXPAYER'S PIN Mark one oval only.		
I authorize to er electronically filed income tax return.	nter my PIN as my signa	ature on my tax year 2023
I will enter my PIN as my signature on my tax year 2023 electronically	filed income tax return.	
Signature		Date
SECTION III CERTIFICATION AND AUTHENTICATION – PI	RACTITIONER PIN PROGRAM PARTICIPAN	ITS ONLY
ERO'S EFIN/PIN Enter your six-digit EFIN followed by your five-digit self-sele	ected PIN222496_ / _08271	
As a participant in the Practitioner PIN Program, I certify the above numeric elincome tax return for the taxpayer(s) indicated above. I confirm I am participestablished for this program.		
ERO's Signature		Date

The ERO must retain this form and supporting documents for three years.

DO NOT SUBMIT THIS FORM TO THE PA DEPARTMENT OF REVENUE UNLESS REQUESTED TO DO SO.

2023

► Keep for your record

	LI	ne 1a			► Keep for your re	ecords					
Name /IN/		KUMAI	R NA	ANDALA			Social 676-	Security Number 76-3924	er		
					Federal Forms	W-2					
# of W2	* N T / T X B L	TS	N R H	Employer identification number from		Employer identification number from wages wages		from box 1 Medicare	com froi (See Peni inc tax	nsylvania state) pensation m box 16 Tax Help) nsylvania (state) come tax withheld m box 17	ST ID
				STRATEGIC 22-35927	RESOURCES INTERNATIONAL 796	112,886.		112,886.	PA —		
F	eder	al Form	n 41	37, Unrepor	le NRH, line 9						
# of W2	*	TS	ide	Employer entification mber from box B	Locality name	Local wage tips, etc. (local) from box 1		ocal income tax (local) from box 19	ST ID		
_1 		<u>T</u>	22-	-3592796	151205 	112,8	86.	1,919.	<u>PA</u>		
Fe N	eder onca	ál Forr ash tip:	ո 41 s․ .	37, Unreport	ted Tips, line 6		ayer ,886.	Spouse	9		
					Excess Reimburs	ements					
	*				Description	Employer's EIN	T/S	Amoun	t		
						Tavns		Spouse			

		KUMAR NANDALA neous Compensation	fron	n Fe	edera	Forms	1099N	IISC, 1		5-76-3924 IEC, and ot	Page : her statement :	
	*	* Payer Name			Pa	yer EIN	T/S	Code	PA Taxable Comp.	PA Tax Withheld	Fed. Income	
-												
-												
D		rania Darmant trons										
A	Exe	ylvania Payment type: Executor fee H				Other nonemployee compensation.						
B Jury duty pay Describe:												
C Director's fee I Employer sponsored retirement/pension/de D Expert witness fee J Distribution from IRA (Traditional or Roth)							nt/pension/def	erred comper	nsation plan			
Ε		norarium							e, Annuity or E	Endowment C	ontracts	
F	Cov	venant not to compete		L	Distrib	ution from	ı Chari	table Gi	ift Annuities			
G	Dai	mages or settlement fo twages, other than	r I	M	Distrib Descri	ution from	n Emplo	oyee St	ock Ownershi _l	o Plan.		
		sonal injury				ary fees fr	om a ti	rust				
	O Other income not listed above Describe:											
									Тахра	aver	Spouse	
		laneous Compensation					099K/1	1099NE		., · · ·	Spoudo	
l W	/ithho	olding										
			Coı	mpe	ensati	on from	Fede	ral For	ms 1099R			
	*	Payer's EIN Payer's Name	Ts	Fed #	PA Type	Gro Distrib			Basis I	PA Taxable	PA Tax Withheld	
_												
			_					_	_			
-												
			_	_				_				
	* E	nter an 'X' if this incom	e is	Not	subjec	t to Penn	sylvani	a tax - F	PA Part-Year a	and Nonreside	ents Only.	
Peni	nevl	/ania Distribution typ	ъ.									
N		entry					122	2 l'm r	not eligible yet	plan is eligib	le in PA	
131	1 PA school, state, or municipal employee plan J1 Traditional or Roth IRA; I'm over 59.5								r 59.5			
111 132		United Mine Workers pension J2 Military pension K2							Traditional or Roth IRA; I'm under 59.5 Non-qualified deferred compensation plan			
133		S. Civil service retirement/disability/annuity K3										
K1	Anr	Annuity or Non-civil service disability L										
(including Qual Joint Survivorship Annuity) M1 ESOP: Allocated ESOP Stock Dividen 134 Early distribution from a retirement plan M2 ESOP: Non Allocated ESOP Stock Dividen												
 Early distribution from a retirement plan Rollover ESOP: Non-Allocated ESOP Stock D KSOP: Taxable ESOP within a 401(k 												
113												
		ibution from Life Incurs							Тахра	ayer	Spouse	

	Taxpayer	Spouse
Distribution from Life Insurance, Annuity, Endowment Contracts or		•
ineligible retirement plans (see Tax Help FAQ's for more info)		
Distribution from Charitable Gift Annuities		
Compensation from Form 1099R (eligible retirement plans)		
Withholding		

Total Gross Compensation

	Taxpayer	Spouse
Total gross compensation to Form PA-40 line 1a Total Schedule NRH gross compensation to PA-40, line 12	112,886.	0.
Withholding to Form PA-40 line 13	3,466.	
<u> </u>		

112,886.

^{*} Enter an 'X' if this income is **Not** subject to Pennsylvania tax.