Form <b>8879</b>
(Rev. January 2021)
Department of the Treesury

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.

Submission Identification Number (SID)

Taxpay	/er's name	Social security num	iber
SIV	YAJI RAJA MUGGARI	725-61-842	29
Spouse	e's name	Spouse's social sec	curity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Ent	er year you are au	ithorizing.)
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	94,018.
2	Total tax	2	10,130.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	15,907.
4	Amount you want refunded to you	4	5,777.
5	Amount you owe	5	

#### Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your 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

	1 4441101120			EPO firm name		E
X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	

1	8	4	2	9	
Ent don	er fiv n't er	/e 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 s	ignature D	ate 🕨	•							
	Practitioner PIN Method Returns Only—continue	bel	ow							
Part III	Certification and Authentication – Practitioner PIN Method Only									
ERO's EFII	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	 	 6 nter a		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 🕨	
ERO Must Retain Don't Submit This Form to			
For Paperwork Reduction Act Notice, see your tax return instruction	ctions. BAA	REV 02/16/24 PRO	Form <b>8879</b> (Rev. 01-2021)

<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use Only	–Do not v	vrite or sta	aple in this space.
For the year Jan	. 1–Dec	2. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	parate	instructions.
Your first name	and mi	iddle initial	Last r	name						Your so	ocial sec	curity number
SIVAJI R	ATA		MUG	GARI						725	61	8429
		s first name and middle initial	Last r									security number
										271	55	2377
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	Apt. no.			ection Campaign
2028 HYD	DE PA	ARK PLACE								Check	here if y	ou, or your
		ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	te	ZIP c	ode		0	jointly, want \$3
MANTECA						CA	ł	953	36			nd. Checking a not change
Foreign country	name			Foreign p	rovince/state/o	count	ty	Foreig	n postal code		x or refu	0
											🗌 Yo	ou 🗌 Spouse
Filing Status	; [	Single					Head of h	ouseh	old (HOH)			
Check only		] Married filing jointly (even if only o	ne hac	l income)								
one box.	X	Married filing separately (MFS)					Qualifying	surviv	ing spouse	(QSS)		
	lf y	ou checked the MFS box, enter the	name	of your s	pouse. If you	ı che	ecked the HOH	l or Q	SS box, ente	er the ch	ild's na	me if the
	qu	alifying person is a child but not you	ır depe	endent: P	PRIYA GUNDI	UPET	VENKATESH					
Digital	Δt ar	ny time during 2023, did you: (a) rec	oivo (a	s a roward	d award or	navr	ment for prope	rtv or	services): or	(h) sell		
Digital Assets		ange, or otherwise dispose of a dig						-		. ,		es 🛛 No
Standard		eone can claim:  You as a de					a dependent	-)- (		,		
Deduction		Spouse itemizes on a separate retur	•		•							
		Were born before January 2, 1		Are bl		ouse		n hofe	ore January	2 1050		s blind
Dependents	_		000		•		(3) Relationsh	14	,	-		(see instructions):
•		irst name Last name		(2) 3	Social security number		to you	ip (	Child tax c		1	or other dependents
lf more than four	(.,											
dependents,												
see instructions	s ——											
and check here									$\square$			
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	tions)					. 1a	a	108,921.
	b	Household employee wages not re	eporte	d on Form	n(s) W-2					. 1k	<b>)</b>	
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	ı (see i	nstruction	ıs)					. 10	>	
attach Forms	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see ir	nstru	ictions)			. 10	ł	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom F	orm 2441,	line 26 .					. 16	•	
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8	839, line 29					. 11	F	
If you did not	g	Wages from Form 8919, line 6 .								. 1ç	3	
get a Form W-2, see	h	Other earned income (see instruct						· ·		. 1ł	۱	0.
instructions.	i	Nontaxable combat pay election (	see ins	structions)			<b>1</b> i					
	z	Add lines 1a through 1h	· ;							. 12	2	108,921.
Attach Sch. B	2a	· · -	2a			b Ta	axable interest	t.		. 2t	<b>)</b>	2.
if required.	3a		3a				ordinary divide			. 3k	<b>)</b>	0.
Standard	4a		4a				axable amoun			. 4k	>	
Deduction for –	5a		5a				axable amoun			. 5k		
<ul> <li>Single or Married filing</li> </ul>	6a	, _	6a				axable amoun	t	· · ·	. 6t	>	
separately,	_c	If you elect to use the lump-sum e				`	,	• •	l	$\exists$		1 5 6 6
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche		•	•			• •	l			-1,500.
jointly or Qualifying	8	Additional income from Schedule						• •		. 8		-13,405.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7				ome	θ		· · ·	. 9		94,018.
\$27,700 • Head of	10	Adjustments to income from Sche			· · · ·	••••		• •		. 10		0.4 0.1 0
household, [ \$20,800	11	Subtract line 10 from line 9. This is						• •		. 11	-	94,018.
• If you checked	12	Standard deduction or itemized		•		,		• •		. 12		26,626.
any box under Standard	13	Qualified business income deduct		m Form 8	ອອວ or ⊢orm	899	э-А	• •		. 13		26 626
Deduction, see instructions.	14 15	Add lines 12 and 13	· ·	· · ·		 				. 14		26,626.
	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-u This is y	ourt	laxable incom	ie .		. 15		67,392.

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

Form **1040** (2023)

Form 1040 (2023	3)							Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3 🗌	1	<b>6</b> 10,130.
Credits	17	Amount from Schedule 2, lin	e3				1	7
	18	Add lines 16 and 17					1	8 10,130.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		1	9
	20	Amount from Schedule 3, lin	ie8				2	0
	21	Add lines 19 and 20					2	1
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			2	<b>2</b> 10,130.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		2	<b>3</b> 0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>				2	4 10,130.
Payments	25	Federal income tax withheld						
-	а	Form(s) W-2				<b>25a</b> 15	,907.	
	b	Form(s) 1099				25b		
	с	Other forms (see instructions	s)			25c		
	d	Add lines 25a through 25c					25	5d 15,907.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	)22 return		2	6
qualifying child,	27	Earned income credit (EIC)				27		
attach Sch. EIC.	28	Additional child tax credit fror				28		
	29	American opportunity credit	from Form 8863	s, line 8		29		
	30	Reserved for future use .				30		
	31	Amount from Schedule 3, lin	ie 15			31		
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits	3	2
	33	Add lines 25d, 26, and 32. T					3	<b>3</b> 15,907.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>	3	<b>4</b> 5,777.
	35a	Amount of line 34 you want			3 is attached, che	ck here	. 🗌 35	5,777.
Direct deposit?	b	Routing number 3 2 2	2 7 1 7	2 4	c Type: 🛛 🗙	Checking	Savings	
See instructions.	d	Account number 4 2 0	1 6 3 5	7 0 9 9	9			
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36		
Amount	37	Subtract line 33 from line 24	. This is the <b>amo</b>	ount you owe				
You Owe		For details on how to pay, ge	o to <i>www.irs.go</i> u	//Payments or	see instructions		3	7
	38	Estimated tax penalty (see in	nstructions) .			38		
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See		
Designee	ins	tructions				🗌 <b>Yes.</b> Co	omplete belov	w. 🗶 No
	De: nar	signee's		Phone no.			onal identificati per (PIN)	on
Ciana		der penalties of perjury, I declare th	nat I have examined		accompanying sche		. ,	est of my knowledge and
Sign		ief, they are true, correct, and com						, ,
Here	Yo	ur signature		Date	Your occupation		If the IRS	sent you an Identity
							Protectio	n PIN, enter it here
Joint return?					SENIOR STA	AFF ENGINEE		·
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>k</b>	ooth must sign.	Date	Spouse's occupat	ion		sent your spouse an protection PIN, enter it here
your records.							(see inst.)	,
	Ph	one no. (657)238-729	6	Email address	STVATT MUCC	ARI@GMAIL.CC		
		eparer's name	o Preparer's signat	1	DIVAUI.MUG		PTIN	Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM					P0208270	
Preparer		n's name GLOBAL TAX		TADAG INAN	GOLIY INTINU	02/27/2024		b. (678)965-9522
Use Only			Y CT E BRU	NGWICK N	J 08816		Firm's Ell	
Go to www.ire.cr		1040 for instructions and the late		NDWICK IN				Form <b>1040</b> (2023)
		noto for instructions and the late	st mornation.		BAA	REV 02/16/24 PRO		10111 IUTU (2023)

REV 02/16/24 PRO

SCHEDULE	1
(Form 1040)	

Department of the Treasury

## Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 23

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. <b>01</b>
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
SIVAJI RAJA MU	GGARI	725-61	-8429

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		5	-13,405.
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	<b>8s</b> (	<u>)</u>	
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:	0_		
0	Total other income. Add lines to through 97	8z		
9 10	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter 1040, 1040-SR, or 1040-NR, line 8		10	-13,405.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedule	1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-ba	asis 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:			
а	Jury duty pay (see instructions)	la		
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit	lb		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m	lc		
d	Reforestation amortization and expenses	ld		
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974	le		
f	Contributions to section 501(c)(18)(D) pension plans	4f		
g	Contributions by certain chaplains to section 403(b) plans 24	lg		
ĥ	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	lh 🛛		
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	4i		
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	lk		
z	Other adjustments. List type and amount:			
	24	lz		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. E			
	Form 1040, 1040-SR, or 1040-NR, line 10	<u></u> .	26	
	BAA R	EV 02/16/24 PRO	Schedule 1	(Form 1040) 202

SCHEDUI	LE A
(Form 104	10)

Department of the Treasury Internal Revenue Service

### **Itemized Deductions**

Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074 20

3

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

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Attachment Sequence No. 07

Name(s) shown on	Form	1040 or 1040-SR		Your s	ocial security number
SIVAJI RA	JA			725-	61-8429
Medical and Dental Expenses		Caution: Do not include expenses reimbursed or paid by others.         Medical and dental expenses (see instructions)         Enter amount from Form 1040 or 1040-SR, line 11         2         Multiply line 2 by 7.5% (0.075)	1		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0	<u> </u>	4	
Taxes You Paid	ł	State and local taxes. a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box	<b>5a</b> 7,89 <b>5b</b> 9,228		
		State and local personal property taxes	<b>5c</b> <b>5d</b> 17,12	3.	
		Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)	<b>5e</b> 5,00	).	
	Ŭ		6		
	7	Add lines 5e and 6		7	5,000.
Interest You Paid Caution: Your mortgage interest deduction may be limited. See instructions.	e k c c e	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box       Improve your home, see instructions and check this box         a Home mortgage interest and points reported to you on Form 1098. See instructions if limited       Improve you on Form 1098. See instructions if limited         b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address         c Points not reported to you on Form 1098. See instructions for special rules         c Reserved for future use       Improve you on Form 1098. See instructions for special rules	8a 21,624 8b 8c 8d 8e 21,624		
		Investment interest. Attach Form 4952 if required. See instructions		2.	21 626
Gifts to Charity Caution: If you made a gift and got a benefit for it, see instructions.	11 12 13	Add lines 8e and 9.       .	11 12 13		
		Add lines 11 through 13		14	
Casualty and Theft Losses		Casualty and theft loss(es) from a federally declared disaster (other disaster losses). Attach Form 4684 and enter the amount from line 1 instructions	8 of that form. Se	e 15	
Other Itemized Deductions	16	Other-from list in instructions. List type and amount:			
Total Itemized Deductions		Add the amounts in the far right column for lines 4 through 16. Also, e Form 1040 or 1040-SR, line 12		17	26,626.
		check this box			ule A (Form 1040) 2023
			EV UZ/ 10/24 PKU	Source	

### 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.

Attachment Sequence No. **12** 

20

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

SIVAJI RAJA MUGGARI

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? 
Yes 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.	<b>(d)</b> Proceeds	(e) Cost	<b>(g)</b> Adjustment to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	Form(s) 8949, F line 2, column	Part 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 <b>Box A</b> checked	214,404.	277,432.	27,6	39.	-35,389.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> 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 <b>Worksheet</b> in the instructions	Carryover	6	( 64,393.)		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise		7	-99,782.		

### Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

	instructions for how to figure the amounts to enter on the below.	<b>(d)</b> Proceeds	<b>(e)</b> Cost	<b>(g)</b> Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, 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	101.	138.		6.	-31.
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> 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		12			
13	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 on the back .	•			15	-31.

Your social security number

725-61-8429

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	-99,813.
	• If line 16 is a <b>gain</b> , 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.		
	• If line 16 is <b>zero</b> , 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 <b>both</b> gains?		
	<ul> <li>☐ No. Skip lines 18 through 21, and go to line 22.</li> </ul>		
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18	
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19	
20	<ul> <li>Are lines 18 and 19 both zero or blank and you are not filing Form 4952?</li> <li>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.</li> </ul>		
	☐ 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	( 1,500.)
	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 02/16/24 PRO

Schedule D (Form 1040) 2023

Form **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.



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

Social security number or taxpayer identification number

SIVAJI RAJA MUGGARI

725-61-8429

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

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis See the <b>Note</b> 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 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 Securities LLC	01/01/23	12/31/23	176,134.	228,400.	W	26,440.	-25,826.	
AMERITRADE	01/01/23	12/31/23	23,795.	31,307.	W	776.	-6,736.	
AMERITRADE	01/01/23	12/31/23	14,475.	17,725.	W	423.	-2,827.	
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	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	214,404.	277,432.		27,639.	-35,389.	

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

Form 8949 (2023)	Attachment Sequence No.

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

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

**Part II Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

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

- [] (E) 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) Description of property (Example: 100 sh. XYZ Co.)	<b>(b)</b> Date acquired (Mo., day, yr.)	<b>(c)</b> Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e) in the separate	See the separate instructio		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
		(1010., day, yr.)		instructions.	Code(s) from instructions	Amount of adjustment	with column (g).
Robinhood Securities LLC	01/01/23	12/31/23	101.	138.	W	б.	-31.
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).			101.	138.		б.	-31.

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.

2Δ

Social security number or taxpayer identification number

725-61-8429

Page 2

(Form	1040)	(Fr	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)									90	<b>73</b>
Department of the Treasury Internal Revenue Service Go to www.irs.gov/ScheduleE for instruction										nformation.		Attachn Sequen	nent ce No. <b>13</b>
Name(s)	) shown on return	<b></b>			-						Your socia	al security	
SIVA	JI RAJA MU	GGA	ARI								725-6	1-8429	
Part	I Income	or	Loss	From Rent	tal Real Estate ar	nd Ro	yalties						
	rental inco	ome o	or los	s from Form 48	enting personal prope <b>35</b> on page 2, line 40.	-							
					at would require you								
B	f "Yes," did you	l or v	will yo	ou file require	d Form(s) 1099? .							. 🗌 Ye	es 🗌 No
1a	Physical add	ress	of ea	ach property (	street, city, state, ZI	P code	e)						
Α	SANAMPUDI	CO	LON	Y,RD.2 SI	NGARAYAKONDA	ANDHI	RA PRAL	ESH	IN 5	23101			
В													
С													
1b	Type of Prope	erty	2	For each rer	tal real estate prope	erty lis <sup>:</sup>	ted		Fa	air Rental	Person	al Use	QJV
	(from list below	w)		above, repoi	rt the number of fair	rental	and			Days	Da	ys	QJV
Α	3				e days. Check the Q			Α		365		0	
В				aualified join	he requirements to t venture. See instru	ille as	a	В					
С				quanted join				С					
	of Property:												
	Single Family R				tion/Short-Term Rer	ntal	5 Land			Self-Rental			
2	Multi-Family Re	eside	ence	4 Comr	nercial		6 Roya	lties	8	Other (desc	ribe)		
										Properti	es:		
Incom	ne:							Α		В			С
3	Rents received	. b				3		6	00.				
4	Royalties rece	ived				4							
Exper	ises:												
5	Advertising					5							
6	Auto and trave	el (se	e ins	structions) .		6							
7	Cleaning and I	mair	ntena	nce		7		1,3	25.				
8	Commissions					8							
9	Insurance .					9							
10	•					10							
11	Management f	fees				11		1,0	00.				
12					. (see instructions)	12							
13	Other interest	•	• •			13							
14	Repairs	• •	• •			14		2,8					
15						15		2,6	93.				
16						16							
17						17			75.				
18	-	expe	nse c	or depletion .		18		2,8	71.				
19 20					10	19		14 0	0.5				
20				•	19	20		14,0	05.				
21		s), se	ee ins	structions to f	nd/or 4 (royalties). If ind out if you must	21		-13,4	05.				
22					er limitation, if any,	22	(	13,40	)5.)	(	)	(	
23a	Total of all am	ount	ts rep	oorted on line	3 for all rental prope	erties			23a		600.		
b	Total of all am	ount	ts rep	oorted on line	4 for all royalty prop	perties			23b				
с	Total of all am	ount	ts rep	oorted on line	12 for all properties				23c				
d	Total of all am	ount	ts rep	oorted on line	18 for all properties				23d		2,871.		
е					20 for all properties				23e	14	,005.		
24		-			n on line 21. <b>Do no</b>		-				. 24		
25	Losses. Add ro	ovaltv	y loss	ses from line 2 <sup>-</sup>	1 and rental real estat	te losse	es from lin	e 22. E	nter to	tal losses her	e <b>25</b>	(	13,405.

Supplemental Income and Loss

SCHEDULE E

26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .

26

-13,405.

OMB No. 1545-0074

Form <b>4952</b>
Department of the Treasury

## **Investment Interest Expense Deduction**

OMB No. 1545-0191

Attach to your tax return.

Go to www.irs.gov/Form4952 for the latest information.

2023 Attachment Sequence No. 51

Identifying number

725-61-8429

Internal Revenue Service Name(s) shown on return

SIVAJI RAJA MUGGARI

#### Part I **Total Investment Interest Expense**

1	Investment interest expense paid or accrued in 2023 (see instructions)	1	27.
2	Disallowed investment interest expense from 2022 Form 4952, line 7	2	
3	Total investment interest expense. Add lines 1 and 2	3	27.

#### Part II **Net Investment Income**

4a	Gross income from property held for investment (excluding any net gain from		
	the disposition of property held for investment)		
b	Qualified dividends included on line 4a		
С	Subtract line 4b from line 4a	4c	2.
d	Net gain from the disposition of property held for investment		
е	Enter the <b>smaller</b> of line 4d or your net capital gain from the disposition of property held for investment. See instructions		
f	Subtract line 4e from line 4d	4f	0.
g	Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions	4g	
h	Investment income. Add lines 4c, 4f, and 4g	4h	2.
5	Investment expenses (see instructions)	5	
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0	6	2.
Part	III Investment Interest Expense Deduction		
7	Disallowed investment interest expense to be carried forward to 2024. Subtract line 6 from line		
	3. If zero or less, enter -0	7	25.
8	Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions	8	2.
For Pa	perwork Reduction Act Notice, see page 4. BAA REV 02/16/24 PRO		Form <b>4952</b> (2023)

For Paperwork Reduction Act Notice, see page 4. BAA

Form **4952** (2023)

**Itemization Statement** 

# Additional Information From 2023 Federal Tax Return

### Schedule A: Itemized Deductions Ln 5b(a), RE tax main res

Description	Amount
PROPERTY TAX	1,481.24
PROPERTY TAX	3,872.82
PROPERTY TAX	3,873.53
Total	9,227.59