

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 20 See separate instructions.

Personal information section including name (SANGAMESHWARA CHARY), social security number (848 69 5090), address (7225 CROSSROADS GARDEN DR, ORLANDO, FL 32821), and marital status (Married filing jointly).

Filing Status section with checkboxes for Single, Married filing jointly (checked), Married filing separately, Head of household, and Qualifying surviving spouse.

Digital Assets section asking if a digital asset was received or sold during 2023, with a checked 'No' response.

Standard Deduction section with checkboxes for claiming as a dependent or spouse itemizer.

Age/Blindness section with checkboxes for age and blindness status for both taxpayer and spouse.

Table for Dependents with columns for name, social security number, relationship, and tax credit status.

Main income table with columns for description (1a-15), taxable amount (2a-6b), and total/adjusted income (7-15). Total income is 108,952 and taxable income is 81,249.

Attach Sch. B if required.

Standard Deduction for— Single or Married filing separately, \$13,850; Married filing jointly or Qualifying surviving spouse, \$27,700; Head of household, \$20,800.

<b>Tax and Credits</b>	<b>16</b>	<b>Tax</b> (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____ . . .	<b>16</b>	9,289.
	<b>17</b>	Amount from Schedule 2, line 3 . . . . .	<b>17</b>	
	<b>18</b>	Add lines 16 and 17 . . . . .	<b>18</b>	9,289.
	<b>19</b>	Child tax credit or credit for other dependents from Schedule 8812 . . . . .	<b>19</b>	
	<b>20</b>	Amount from Schedule 3, line 8 . . . . .	<b>20</b>	1.
	<b>21</b>	Add lines 19 and 20 . . . . .	<b>21</b>	1.
	<b>22</b>	Subtract line 21 from line 18. If zero or less, enter -0- . . . . .	<b>22</b>	9,288.
	<b>23</b>	Other taxes, including self-employment tax, from Schedule 2, line 21 . . . . .	<b>23</b>	0.
	<b>24</b>	Add lines 22 and 23. This is your <b>total tax</b> . . . . .	<b>24</b>	9,288.

<b>Payments</b>	<b>25</b>	Federal income tax withheld from:		
	<b>a</b>	Form(s) W-2 . . . . .	<b>25a</b>	18,021.
	<b>b</b>	Form(s) 1099 . . . . .	<b>25b</b>	
	<b>c</b>	Other forms (see instructions) . . . . .	<b>25c</b>	
	<b>d</b>	Add lines 25a through 25c . . . . .	<b>25d</b>	18,021.
	<b>26</b>	2023 estimated tax payments and amount applied from 2022 return . . . . .	<b>26</b>	
	<b>27</b>	Earned income credit (EIC) . . . . . <input type="checkbox"/> No	<b>27</b>	
	<b>28</b>	Additional child tax credit from Schedule 8812 . . . . .	<b>28</b>	
	<b>29</b>	American opportunity credit from Form 8863, line 8 . . . . .	<b>29</b>	
	<b>30</b>	Reserved for future use . . . . .	<b>30</b>	
	<b>31</b>	Amount from Schedule 3, line 15 . . . . .	<b>31</b>	
	<b>32</b>	Add lines 27, 28, 29, and 31. These are your <b>total other payments and refundable credits</b> . . . . .	<b>32</b>	
	<b>33</b>	Add lines 25d, 26, and 32. These are your <b>total payments</b> . . . . .	<b>33</b>	18,021.

<b>Refund</b>	<b>34</b>	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b> . . . . .	<b>34</b>	8,733.									
	<b>35a</b>	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here . . . . . <input type="checkbox"/>	<b>35a</b>	8,733.									
Direct deposit? See instructions.	<b>b</b>	Routing number <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>2</td><td>1</td><td>1</td><td>3</td><td>9</td><td>1</td><td>8</td><td>2</td><td>5</td></tr></table> <b>c</b> Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings	2	1	1	3	9	1	8	2	5		
2	1	1	3	9	1	8	2	5					
	<b>d</b>	Account number <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>4</td><td>2</td><td>1</td><td>8</td><td>0</td><td>1</td><td>0</td><td>9</td></tr></table>	4	2	1	8	0	1	0	9			
4	2	1	8	0	1	0	9						
	<b>36</b>	Amount of line 34 you want <b>applied to your 2024 estimated tax</b> . . . . .	<b>36</b>										

<b>Amount You Owe</b>	<b>37</b>	Subtract line 33 from line 24. This is the <b>amount you owe</b> . For details on how to pay, go to <a href="http://www.irs.gov/Payments">www.irs.gov/Payments</a> or see instructions . . . . .	<b>37</b>	
	<b>38</b>	Estimated tax penalty (see instructions) . . . . .	<b>38</b>	

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS? See instructions  **Yes**. Complete below.  **No**

Designee's name	Phone no.	Personal identification number (PIN)
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**Sign Here** Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation SOFTWARE ENGINEER	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation SENIOR ASSOCIATE	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
Phone no. (913) 671-9337	Email address SANGAMESH.CHARY@GMAIL.COM		

**Paid Preparer Use Only**

Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM	Preparer's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM	Date 02/23/2024	PTIN P02082703	Check if: <input type="checkbox"/> Self-employed
Firm's name GLOBAL TAXES LLC	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816			Phone no. (678) 965-9522
				Firm's EIN 84-3171965

**SCHEDULE 1**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Income and Adjustments to Income**

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

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2023**

Attachment  
Sequence No. **01**

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

SANGAMESHWARA CHARY KAMSALI & SANJANA MAROJU

Your social security number

848-69-5090

**Part I Additional Income**

<b>1</b>	Taxable refunds, credits, or offsets of state and local income taxes . . . . .		<b>1</b>	
<b>2a</b>	Alimony received . . . . .		<b>2a</b>	
<b>b</b>	Date of original divorce or separation agreement (see instructions): _____			
<b>3</b>	Business income or (loss). Attach Schedule C . . . . .		<b>3</b>	
<b>4</b>	Other gains or (losses). Attach Form 4797 . . . . .		<b>4</b>	
<b>5</b>	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E . . . . .		<b>5</b>	-18,939.
<b>6</b>	Farm income or (loss). Attach Schedule F . . . . .		<b>6</b>	
<b>7</b>	Unemployment compensation . . . . .		<b>7</b>	
<b>8</b>	Other income:			
<b>a</b>	Net operating loss . . . . .	<b>8a</b> ( )		
<b>b</b>	Gambling . . . . .	<b>8b</b>		
<b>c</b>	Cancellation of debt . . . . .	<b>8c</b>		
<b>d</b>	Foreign earned income exclusion from Form 2555 . . . . .	<b>8d</b> ( )		
<b>e</b>	Income from Form 8853 . . . . .	<b>8e</b>		
<b>f</b>	Income from Form 8889 . . . . .	<b>8f</b>		
<b>g</b>	Alaska Permanent Fund dividends . . . . .	<b>8g</b>		
<b>h</b>	Jury duty pay . . . . .	<b>8h</b>		
<b>i</b>	Prizes and awards . . . . .	<b>8i</b>		
<b>j</b>	Activity not engaged in for profit income . . . . .	<b>8j</b>		
<b>k</b>	Stock options . . . . .	<b>8k</b>		
<b>l</b>	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 . . . . .	<b>8l</b>		
<b>m</b>	Olympic and Paralympic medals and USOC prize money (see instructions) . . . . .	<b>8m</b>		
<b>n</b>	Section 951(a) inclusion (see instructions) . . . . .	<b>8n</b>		
<b>o</b>	Section 951A(a) inclusion (see instructions) . . . . .	<b>8o</b>		
<b>p</b>	Section 461(l) excess business loss adjustment . . . . .	<b>8p</b>		
<b>q</b>	Taxable distributions from an ABLE account (see instructions) . . . . .	<b>8q</b>		
<b>r</b>	Scholarship and fellowship grants not reported on Form W-2 . . . . .	<b>8r</b>		
<b>s</b>	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d . . . . .	<b>8s</b> ( )		
<b>t</b>	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan . . . . .	<b>8t</b>		
<b>u</b>	Wages earned while incarcerated . . . . .	<b>8u</b>		
<b>z</b>	Other income. List type and amount: _____	<b>8z</b>		
	Other Income from box 3 of 1099-Misc 4.			4.
<b>9</b>	Total other income. Add lines 8a through 8z . . . . .		<b>9</b>	4.
<b>10</b>	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 . . . . .		<b>10</b>	-18,935.

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

Schedule 1 (Form 1040) 2023

**Part II Adjustments to Income**

<b>11</b>	Educator expenses . . . . .		<b>11</b>
<b>12</b>	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 . . . . .		<b>12</b>
<b>13</b>	Health savings account deduction. Attach Form 8889 . . . . .		<b>13</b>
<b>14</b>	Moving expenses for members of the Armed Forces. Attach Form 3903 . . . . .		<b>14</b>
<b>15</b>	Deductible part of self-employment tax. Attach Schedule SE . . . . .		<b>15</b>
<b>16</b>	Self-employed SEP, SIMPLE, and qualified plans . . . . .		<b>16</b>
<b>17</b>	Self-employed health insurance deduction . . . . .		<b>17</b>
<b>18</b>	Penalty on early withdrawal of savings . . . . .		<b>18</b>
<b>19a</b>	Alimony paid . . . . .		<b>19a</b>
<b>b</b>	Recipient's SSN . . . . .		
<b>c</b>	Date of original divorce or separation agreement (see instructions): _____		
<b>20</b>	IRA deduction . . . . .		<b>20</b>
<b>21</b>	Student loan interest deduction . . . . .		<b>21</b>
<b>22</b>	Reserved for future use . . . . .		<b>22</b>
<b>23</b>	Archer MSA deduction . . . . .		<b>23</b>
<b>24</b>	Other adjustments:		
<b>a</b>	Jury duty pay (see instructions) . . . . .	<b>24a</b>	
<b>b</b>	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit . . . . .	<b>24b</b>	
<b>c</b>	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m . . . . .	<b>24c</b>	
<b>d</b>	Reforestation amortization and expenses . . . . .	<b>24d</b>	
<b>e</b>	Repayment of supplemental unemployment benefits under the Trade Act of 1974 . . . . .	<b>24e</b>	
<b>f</b>	Contributions to section 501(c)(18)(D) pension plans . . . . .	<b>24f</b>	
<b>g</b>	Contributions by certain chaplains to section 403(b) plans . . . . .	<b>24g</b>	
<b>h</b>	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) . . . . .	<b>24h</b>	
<b>i</b>	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 . . . . .	<b>24i</b>	
<b>j</b>	Housing deduction from Form 2555 . . . . .	<b>24j</b>	
<b>k</b>	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) . . . . .	<b>24k</b>	
<b>z</b>	Other adjustments. List type and amount: _____	<b>24z</b>	
<b>25</b>	Total other adjustments. Add lines 24a through 24z . . . . .		<b>25</b>
<b>26</b>	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10 . . . . .		<b>26</b>

**SCHEDULE 3  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Credits and Payments**

Attach to Form 1040, 1040-SR, or 1040-NR.  
Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2023**  
Attachment  
Sequence No. **03**

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

SANGAMESHWARA CHARY KAMSALI & SANJANA MAROJU

Your social security number

848-69-5090

**Part I Nonrefundable Credits**

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

(continued on page 2)

**Part II Other Payments and Refundable Credits**

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

**SCHEDULE D  
(Form 1040)**

**Capital Gains and Losses**

OMB No. 1545-0074

**2023**

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/ScheduleD) for instructions and the latest information.

Attachment  
Sequence No. **12**

Name(s) shown on return

SANGAMESHWARA CHARY KAMSALI & SANJANA MAROJU

Your social security number

848-69-5090

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)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> 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 . . . . .				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked . . . . .	31,610.	25,951.	104.	5,763.
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked . . . . .	41.	60.		-19.
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked . . . . .				
<b>4</b> Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . . .				<b>4</b>
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 . . . . .				<b>5</b>
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions . . . . .				<b>6</b> ( )
<b>7 Net short-term capital gain or (loss).</b> Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . .				<b>7</b> 5,744.

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

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> 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 . . . . .				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked . . . . .	11,856.	12,286.	0.	-430.
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked . . . . .	94.	331.		-237.
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked . . . . .				
<b>11</b> Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 . . . . .				<b>11</b>
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 . . . . .				<b>12</b>
<b>13</b> Capital gain distributions. See the instructions . . . . .				<b>13</b>
<b>14</b> Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions . . . . .				<b>14</b> ( )
<b>15 Net long-term capital gain or (loss).</b> Combine lines 8a through 14 in column (h). Then, go to Part III on the back . . . . .				<b>15</b> -667.

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

Schedule D (Form 1040) 2023

**Part III Summary**

<b>16</b>	Combine lines 7 and 15 and enter the result . . . . .	<b>16</b>	5,077.
	<ul style="list-style-type: none"> <li>• 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.</li> <li>• 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.</li> <li>• 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.</li> </ul>		
<b>17</b>	Are lines 15 and 16 <b>both</b> gains? <input type="checkbox"/> <b>Yes.</b> Go to line 18. <input checked="" type="checkbox"/> <b>No.</b> Skip lines 18 through 21, and go to line 22.		
<b>18</b>	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 . . . . .	<b>18</b>	
<b>19</b>	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 . . . . .	<b>19</b>	
<b>20</b>	Are lines 18 and 19 both zero or blank and you are not filing Form 4952? <input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 16. <b>Don't</b> complete lines 21 and 22 below.  <input type="checkbox"/> <b>No.</b> Complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Don't</b> complete lines 21 and 22 below.		
<b>21</b>	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of: <ul style="list-style-type: none"> <li>• The loss on line 16; or</li> <li>• (\$3,000), or if married filing separately, (\$1,500) } . . . . .</li> </ul> <p><b>Note:</b> When figuring which amount is smaller, treat both amounts as positive numbers.</p>	<b>21</b>	( )
<b>22</b>	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?  <input checked="" type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 16.  <input type="checkbox"/> <b>No.</b> Complete the rest of Form 1040, 1040-SR, or 1040-NR.		



## 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.

2023

Attachment  
Sequence No. **12A**

Go to [www.irs.gov/Form8949](http://www.irs.gov/Form8949) for instructions and the latest information.

Name(s) shown on return <u>SANGAMESHWARA CHARY KAMSALI &amp; SANJANA MAROJU</u>	Social security number or taxpayer identification number <u>848-69-5090</u>
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*Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.*

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

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

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

- (A)** Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (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 (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss)</b> Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	Robinhood Securities LLC	01/01/23	12/31/23	31,610.	25,951.	W	104.	5,763.
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 1b</b> (if <b>Box A</b> above is checked), <b>line 2</b> (if <b>Box B</b> above is checked), or <b>line 3</b> (if <b>Box C</b> above is checked).				31,610.	25,951.		104.	5,763.

**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.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SANGAMESHWARA CHARY KAMSALI & SANJANA MAROJU	Social security number or taxpayer identification number 848-69-5090
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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) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss)</b> Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	Robinhood Securities LLC	01/01/23	12/31/23	11,856.	12,286.	W	0.	-430.

<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 8b</b> (if <b>Box D</b> above is checked), <b>line 9</b> (if <b>Box E</b> above is checked), or <b>line 10</b> (if <b>Box F</b> above is checked) . . .	11,856.	12,286.		0.	-430.
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**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.

**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](http://www.irs.gov/Form8949) for instructions and the latest information.

Name(s) shown on return

Social security number or taxpayer identification number

SANGAMESHWARA CHARY KAMSALI & SANJANA MAROJU

848-69-5090

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

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

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

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

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (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 (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss)</b> Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	Robinhood Crypto LLC	01/01/23	12/31/23	41.	60.			-19.
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 1b</b> (if <b>Box A</b> above is checked), <b>line 2</b> (if <b>Box B</b> above is checked), or <b>line 3</b> (if <b>Box C</b> above is checked).				41.	60.			-19.

**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.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side  
 SANGAMESHWARA CHARY KAMSALI & SANJANA MAROJU

Social security number or taxpayer identification number  
 848-69-5090

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) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss)</b> Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	Robinhood Crypto LLC	01/01/23	12/31/23	94.	331.			-237.
<b>2 Totals.</b>	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 8b</b> (if <b>Box D</b> above is checked), <b>line 9</b> (if <b>Box E</b> above is checked), or <b>line 10</b> (if <b>Box F</b> above is checked).			94.	331.			-237.

**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**

OMB No. 1545-0074

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

**2023**  
Attachment  
Sequence No. **13**

Department of the Treasury  
Internal Revenue Service

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

Go to [www.irs.gov/ScheduleE](http://www.irs.gov/ScheduleE) for instructions and the latest information.

Name(s) shown on return

SANGAMESHWARA CHARY KAMSALI & SANJANA MAROJU

Your social security number

848-69-5090

**Part I Income or Loss From Rental Real Estate and Royalties**

**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.

- A** Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . . . . .  Yes  No  
**B** If "Yes," did you or will you file required Form(s) 1099? . . . . .  Yes  No

**1a** Physical address of each property (street, city, state, ZIP code)

**A** 1-3-277/70 DATTAGIRI COLNY ZAHEERABAD TELANGANA IN 502220

**B**  
**C**

1b Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days		Personal Use Days	QJV
		A	B	C	
<b>A</b> 3		365		0	<input type="checkbox"/>
<b>B</b>					<input type="checkbox"/>
<b>C</b>					<input type="checkbox"/>

**Type of Property:**

- 1 Single Family Residence      3 Vacation/Short-Term Rental      5 Land      7 Self-Rental  
 2 Multi-Family Residence      4 Commercial      6 Royalties      8 Other (describe) \_\_\_\_\_

Income:	Properties:		
	A	B	C
<b>3</b> Rents received . . . . .	<b>3</b> 714.		
<b>4</b> Royalties received . . . . .	<b>4</b>		
<b>Expenses:</b>			
<b>5</b> Advertising . . . . .	<b>5</b>		
<b>6</b> Auto and travel (see instructions) . . . . .	<b>6</b>		
<b>7</b> Cleaning and maintenance . . . . .	<b>7</b> 2,941.		
<b>8</b> Commissions . . . . .	<b>8</b>		
<b>9</b> Insurance . . . . .	<b>9</b>		
<b>10</b> Legal and other professional fees . . . . .	<b>10</b>		
<b>11</b> Management fees . . . . .	<b>11</b> 2,771.		
<b>12</b> Mortgage interest paid to banks, etc. (see instructions)	<b>12</b>		
<b>13</b> Other interest . . . . .	<b>13</b>		
<b>14</b> Repairs . . . . .	<b>14</b> 3,870.		
<b>15</b> Supplies . . . . .	<b>15</b> 3,414.		
<b>16</b> Taxes . . . . .	<b>16</b>		
<b>17</b> Utilities . . . . .	<b>17</b> 3,675.		
<b>18</b> Depreciation expense or depletion . . . . .	<b>18</b> 2,982.		
<b>19</b> Other (list) _____	<b>19</b>		
<b>20</b> Total expenses. Add lines 5 through 19 . . . . .	<b>20</b> 19,653.		
<b>21</b> Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b> . . . . .	<b>21</b> -18,939.		
<b>22</b> Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions) . . . . .	<b>22</b> ( 18,939. )		
<b>23a</b> Total of all amounts reported on line 3 for all rental properties . . . . .	<b>23a</b> 714.		
<b>b</b> Total of all amounts reported on line 4 for all royalty properties . . . . .	<b>23b</b>		
<b>c</b> Total of all amounts reported on line 12 for all properties . . . . .	<b>23c</b>		
<b>d</b> Total of all amounts reported on line 18 for all properties . . . . .	<b>23d</b> 2,982.		
<b>e</b> Total of all amounts reported on line 20 for all properties . . . . .	<b>23e</b> 19,653.		
<b>24</b> <b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include any losses . . . . .	<b>24</b>		
<b>25</b> <b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	<b>25</b> ( 18,939. )		
<b>26</b> <b>Total rental real estate and royalty income or (loss).</b> 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 . . . . .	<b>26</b> -18,939.		

For Paperwork Reduction Act Notice, see the separate instructions.

NPA

-18,939.

Schedule E (Form 1040) 2023

## Qualified Business Income Deduction Simplified Computation

Department of the Treasury  
Internal Revenue Service

**Attach to your tax return.**

Attachment  
Sequence No. **55**

Go to [www.irs.gov/Form8995](http://www.irs.gov/Form8995) for instructions and the latest information.

Name(s) shown on return

SANGAMESHWARA CHARY KAMSALI & SANJANA MAROJU

Your taxpayer identification number

848-69-5090

**Note.** You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.  
Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)
i			
ii			
iii			
iv			
v			
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	<b>2</b>	
3	Qualified business net (loss) carryforward from the prior year	<b>3</b> ( )	
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	<b>4</b>	
5	Qualified business income component. Multiply line 4 by 20% (0.20)		<b>5</b>
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	<b>6</b> 13.	
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	<b>7</b> ( )	
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	<b>8</b> 13.	
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		<b>9</b> 3.
10	Qualified business income deduction before the income limitation. Add lines 5 and 9		<b>10</b> 3.
11	Taxable income before qualified business income deduction (see instructions)	<b>11</b> 81,252.	
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	<b>12</b> 178.	
13	Subtract line 12 from line 11. If zero or less, enter -0-	<b>13</b> 81,074.	
14	Income limitation. Multiply line 13 by 20% (0.20)		<b>14</b> 16,215.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions)		<b>15</b> 3.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-		<b>16</b> ( 0. )
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-		<b>17</b> ( 0. )

FORM 40NR Alabama 2023 Individual Income Tax Return NONRESIDENTS ONLY



Your social security number 848-69-5090

Spouse's SSN if joint return 211-33-2853

Check if primary is deceased Primary's deceased date (mm/dd/yyyy)

Check if spouse is deceased Spouse's deceased date (mm/dd/yyyy)

Your first name Initial Last name SANGAMESHWARA CHARY KAMSALI

Spouse's first name Initial Last name SANJANA MAROJU

Present home address (number and street or P.O. Box number) 7225 CROSSROADS GARDEN DR 4211

City, town, or post office State ZIP code ORLANDO FL 32821

CHECK BOX IF AMENDED RETURN Foreign Country Check if address is outside U.S.

Filing Status/ 1 Single \$1,500 3 Married filing separate. Complete Spouse SSN NRA

Exemptions 2 Married filing joint \$3,000 4 Head of Family (with qualifying person). Complete Schedule HOF.

	A - Alabama Tax Withheld		B - All Sources		C - Alabama Income	
	5	104	5	122,182	5	5,194
6 Other income (from page 2, Part I, line 9)			6	632	6	0
7 Total income. Add amounts in col. B then add amounts in col. C, lines 5 and 6			7	122,814	7	5,194
8 Adjustments to income (from page 2, Part II, line 8)			8		8	
9 Adjusted total income. Subtract line 8 from line 7			9	122,814	9	5,194
10 Alabama percentage of adjusted total income. Divide line 9, col. C, by line 9, col. B (not over 100%)			10		10	4.23%
11 Other Adjustments (from page 2, Part III, line 4 and line 6)			11		11	
12 Adjusted Gross Income. Subtract line 11 from line 9			12	122,814	12	5,194

Deductions	Box a or b MUST be checked	
	13	407
13 Check appropriate box. If you itemize, enter amount from Schedule A, line 30. a Itemized Deductions b Standard Deduction	13	407
14 Federal Income Tax deduction (from page 2, Part IV, line 7)	14	393
15 Personal exemption (multiply line 1, 2, 3, or 4 by percentage on line 10)	15	127
16 Dependent exemption (from page 2, Part V, line 4)	16	
17 Total deductions. Add lines 13, 14, 15, and 16	17	927

18 Taxable income. Subtract line 17 from line 12, column C	18	4,267
19 Tax due. Enter amount from tax table or check if from Form NOL-85A	19	150
20 Net tax due Alabama. Check box if computing tax using Schedule OC, otherwise enter amount from line 19	20	150

Payments	21	
	21	104
21 Alabama Income Tax withheld (from column A, line 5)	21	104
22 2023 estimated tax payments/Automatic Extension Payment	22	
23 Composite tax payments/Electing PTE credit (from Schedule CP, Section B, line 1)	23	
24 Amended Returns Only - Previous payments (see instructions)	24	
25 Refundable Credits. Enter the amount from the Schedule OC, Section F, line F4	25	
26 Total payments. Add lines 21 through 25	26	104
27 Amended Returns Only - Previous refund (see instructions)	27	
28 Adjusted total payments. Subtract line 27 from line 26	28	104

29 If line 20 is larger than line 28, subtract line 28 from line 20, and add line 30 and enter AMOUNT YOU OWE. Place payment, along with Form 40V, loose in the mailing envelope. (FORM 40V MUST ACCOMPANY PAYMENT.)	29	46
30 Estimated tax penalty (see instructions)	30	

31 If line 28 is larger than line 20, subtract line 20 from line 28 and enter AMOUNT OVERPAID	31	
32 Amount of line 31 to be applied to your 2024 estimated tax	32	
33 REFUNDED TO YOU. If line 31 is greater than zero, subtract lines 30 and 32 from line 31	33	

I authorize a representative of the Department of Revenue to discuss my return and attachments with my preparer.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here In Black Ink Keep a copy of this return for your records. Your Signature Date Daytime Telephone Number Your Occupation (913) 671-9337 SOFTWARE ENGINEER Spouse's Signature (if joint return, BOTH must sign) Date Daytime Telephone Number Spouse's Occupation SENIOR ASSOCIATE Preparer's Signature Date 02/23/2024 Check if Self-employed Preparer's SSN or PTIN E.I. Number P02082703 84-3171965

Paid Preparer's Use Only Firms's Name (or yours if self employed) GLOBAL TAXES LLC Daytime Telephone No. (678) 965-9522 ZIP Code 08816 Address 245 ROONEY CT

MAIL FORM 40NR TO: SEE INSTRUCTIONS



		B – All Sources		C – Alabama Income	
<b>PART I</b>  <b>Other Income</b> (See instructions)	1 Interest and dividend income (attach Schedule B if over \$1500.00) .....	1 ●	628	1 ●	0
	2 Alimony received .....	2 ●			
	3 Taxable portion of pensions and annuities (attach Schedule RS) .....	3 ●			
	4 Business income or (loss) (attach Federal Schedule C) (see instructions) .....	4 ●		4 ●	
	5 Gain or (loss) from sale of Real Estate, Stocks, Bonds, etc. (attach Schedule D) .....	5 ●	0	5 ●	0
	6 Rents, Royalties, Partnerships, Estates, Trusts, etc. (attach Schedule E) .....	6 ●	0	6 ●	0
	7 Farm income or (loss) (attach Federal Schedule F) (see instructions) .....	7 ●		7 ●	
	8 Other income (state nature and source) <u>FEDERAL RETURN OTHER INCOME</u> .....	8 ●	4	8 ●	0
	9 <b>Total other income.</b> Add lines 1 through 8, column B, and lines 1, 4 through 8, column C. Enter here and also on page 1, line 6 .....	9 ●	632	9 ●	0

<b>PART II</b>  <b>Adjustments to Income</b> (See instructions)	1 IRA deduction, Keogh retirement plan, and self-employed SEP deduction .....	1 ●		1 ●	
	2 Penalty on early withdrawal of savings .....	2 ●			
	3 Moving Expenses (Attach Federal Form 3903) .....				
	Place of new employment: _____	3 ●		3 ●	
	4 Self-employed health insurance deduction .....	4 ●		4 ●	
	5 Payments to Alabama College Counts 529 Fund or Alabama PACT program .....	5 ●		5 ●	
	6 Firefighter's Insurance Premiums .....	6 ●		6 ●	
	7 Contributions to an Achieving a Better Life Experience (ABLE) savings account .....	7 ●		7 ●	
8 <b>Adjustments to income.</b> Add lines 1 through 7, Column B, and lines 1, 3 through 7, Column C. Enter here and also on page 1, line 8, columns B and C .....	8 ●		8 ●		

<b>PART III</b>  <b>Other Adjustments</b> (See instructions)	1 Alimony Paid .....	1 ●			
	2 Adoption Expenses .....	2 ●			
	3 Health insurance deduction for small employer employee .....	3 ●			
	4 Add lines 1 through 3, enter here and on page 1, line 11, column B .....	4 ●			
	5 Enter the percentage from page 1, line 10 .....	5 ●	4.23%		
	6 Multiply line 4 by line 5. Enter here and also page 1, line 11, column C .....	6 ●			

<b>PART IV</b>		B – Federal Adjusted Gross Income		C – Alabama Federal Tax Deduction Computation	
If you are filing separately on your Alabama return and jointly on your Federal return, complete all lines below. Otherwise, omit lines 1 through 3.					
<b>Federal Income Tax Deduction</b> (See instructions)	1 Your joint federal adjusted gross income .....	1 ●			
	2 Your federal adjusted gross income .....	2 ●			
	3 Divide line 2 by line 1. Enter percentage here .....			3 ●	%
	4 Enter the Federal Income Tax Liability from worksheet (see instructions) .....			4 ●	9,288
	5 If you completed lines 1 through 3 above, multiply line 4 by the percentage from line 3 .....			5 ●	
	6 Enter the percentage from page 1, line 10 .....			6 ●	4.23%
	7 If you completed lines 1-3 above, multiply line 5 by percentage on line 6. Otherwise, multiply line 4 by percentage on line 6 .....			7 ●	393

<b>PART V</b>  <b>Dependents</b>	1 Total number of dependents from Schedule DS, line 1b .....	1 ●			
	2 Multiply total number of dependents claimed on line 1 by the amount on the dependent chart in the instructions .....	2 ●			
	3 Enter the percentage from page 1, line 10 of your return .....	3 ●			4.23%
	4 Dependent exemption allowable. Multiply the amount on line 2 by the percentage on line 3. Enter here and on page 1, line 16 .....	4 ●			

**PART VI**  
**General Information**

1 Name of state of which you were a legal resident in 2023 FL

2 Did you file a return with that state for 2023?  Yes  No If no, state reason why: NA

3 If married, did your spouse receive a separate income for 2023?  Yes  No If yes, is your spouse filing a separate Alabama return?  Yes  No  
If yes, enter name here. \_\_\_\_\_

**All Taxpayers Must Complete This Section**

4 Did you file an Alabama return for 2022?  Yes  No If no, state reason why: NA

5 Give name and address of your present employer(s). Yours: NONE  
Your Spouse's: SODEXO OPERATIONS LLC P.O. BOX 17033 AUGUSTA GA 30903

6 Enter the Adjusted Gross Income reported on your 2023 Federal Individual Income Tax Return .....

6 ●	108,952
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Drivers License Info	DOB (mm/dd/yyyy) ● <u>XX/XX/XXXX</u>	Your state Spouse state ● <u>XX</u> DL# ● <u>XXXXXXXX</u>	Iss date (mm/dd/yyyy) ● <u>XX/XX/XXXX</u>	Exp date (mm/dd/yyyy) ● <u>XX/XX/XXXX</u>
	DOB (mm/dd/yyyy) ● <u>XX/XX/XXXX</u>	state ● <u>XX</u> DL# ● <u>XXXXXXXX</u>	Iss date (mm/dd/yyyy) ● <u>XX/XX/XXXX</u>	Exp date (mm/dd/yyyy) ● <u>XX/XX/XXXX</u>



**SCHEDULES  
A, B, D, & E**  
(FORM 40NR)



(Schedules B, D, and E are on back)  
ATTACH TO FORM 40NR — SEE INSTRUCTIONS FOR SCHEDULE A

Name(s) as shown on Form 40NR S KAMSALI & S MAROJU	Your social security number 848-69-5090
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The itemized deductions you may claim for the year 2023 are similar to the itemized deductions claimed on your Federal return; however, the amounts may differ. Please see instructions before completing this schedule.

<i>CAUTION: Do not include expenses reimbursed or paid by others.</i>						
<b>Medical and Dental Expenses</b>	1 Medical and dental expenses.....	1	0	00		
	2 Enter amount from Form 40NR, line 12, col. B . . . .	2	00			
	3 Multiply the amount on line 2 by 4% (.04). Enter the result. . . . .	3		00		
	4 Subtract line 3 from line 1. Enter the result. If zero or less, enter -0-.....	4			00	
<b>Taxes You Paid</b>	5 Real estate taxes. . . . .	5		00		
	6 FICA Tax (Social Security and Medicare) and Federal Self-Employment Tax. . . . .	6	9,565	00		
	7 Railroad Retirement. (Tier 1 only) . . . . .	7		00		
	8 Other taxes. (List - include personal property taxes.) OTHER TAXES	8		52	00	
	9 Add the amounts on lines 5 through 8. Enter the total here. . . . .	9			9,617	00
<b>Interest You Paid</b>	10a Home mortgage interest and points reported to you on Federal Form 1098. . . . .	10a		00		
	b Home mortgage interest not reported to you on Federal Form 1098. (If paid to an individual, show that person's name and address.) ▶					
		10b		00		
	NOTE: Personal interest is not deductible.	11		00		
	12 Points not reported to you on Form 1098. . . . .	12		00		
	13 Investment interest. (Attach Form 4952A) . . . . .	13		00		
14 Add the amounts on lines 10a through 13. Enter the total here. . . . .	14			00		
<b>Gifts to Charity</b>	<i>CAUTION: If you made a charitable contribution and received a benefit in return, see instructions.</i>					
	15 Contributions by cash or check (If more than \$250, see instructions). . . . .	15		00		
	16 Other than cash or check. (You <b>MUST</b> attach Federal Form 8283 if over \$500.) . . . . .	16		00		
	17 Carryover from prior year. . . . .	17		00		
18 Add the amounts on lines 15 through 17. Enter the total here. . . . .	18			00		
<b>Qualified Long-Term Care</b>	<i>CAUTION: Do not include medical insurance premiums.</i>					
	19 Enter Amount . . . . .	19			00	
<b>Miscellaneous Deductions</b>	20 Other (from list in the instructions). List type and amount. ▶					
		20			00	
<b>Proration of Above Amounts</b>	21 Total itemized deductions to be prorated. (Add lines 4, 9, 14, 18, 19, and 20.) . . . . .	21		9,617	00	
	22 Enter percentage (%) from Form 40NR, page 1, line 10. . . . .	22		4.23	%	
	23 Multiply line 21 by the percentage on line 22. . . . .	23		407	00	
<b>Alabama Casualty and Theft Losses</b>	24a Enter the loss from Federal Form 4684, either <b>A</b> <input type="checkbox"/> line 15, or <b>B</b> <input type="checkbox"/> line 16, attach copy.	24a		00		
	b Enter 10% of your Adjusted Gross Income (Form 40NR, line 12, column C) if box B checked, otherwise enter zero . . . . .	24b		00		
	c Subtract line 24b from line 24a. If zero or less, enter -0-.....	24c			00	
<b>Alabama Job Related Expenses</b>	25 Unreimbursed employee expenses — job travel, union dues, job education, etc. (You <b>MUST</b> attach Federal Form 2106 if required. See instructions.) ▶	25		00		
	26 Other expenses (investment, tax preparation, safe deposit box, etc.). List type and amount. ▶	26		00		
	27 Add the amounts on lines 25 and 26. Enter the total here. . . . .	27		00		
	28 Multiply the amount on Form 40NR, line 12, column C by 2% (.02). Enter the result here. . . . .	28		00		
29 Subtract line 28 from line 27. Enter the result. If zero or less, enter -0-.....	29			00		
<b>Total Itemized Deductions</b>	30 Add the amounts on lines 23, 24c, and 29. Enter the total here. Then enter on Form 40NR, page 1, line 13 and check 13a, Itemized Deductions. . . . .	30		407	00	



Name(s) as shown on Form 40NR (Do not enter name and social security number if shown on other side) **S KAMSALI & S MAROJU**  
 Your social security number **848-69-5090**

**SCHEDULE B – Interest and Dividend Income**

1	Total Income from Interest and Dividends before any exclusions . . . . .	1	628	00	B Adjusted Gross Income from All Sources	C Adjusted Gross Income Earned in Alabama
2	List all interest received from obligations of the Federal Government, State of Alabama, and political subdivisions of Alabama.					
a	_____	2a		00		
b	_____	2b		00		
c	_____	2c		00		
d	_____	2d		00		
3	Total. Add amounts on lines 2a, b, c, and d. . . . .	3		00		
4	<b>TOTAL TAXABLE INCOME FROM INTEREST AND DIVIDENDS.</b> Subtract line 3 from line 1. Enter here and also on Form 40NR, page 2, Part I, line 1, column B and C. . . . .	4	628	00	0	00

**SCHEDULE D – Profit From Sale of Real Estate, Stocks, Bonds, etc.**

1	Enter total gain or (loss), before any Federal exclusion, from the sale of all assets which is not taxable to the State of Alabama.	1		00	B	C					
2	Itemize all other transactions which are taxable to Alabama in columns a through f below.										
a	Kind of Property & Location	b	Date Acquired	c	Amount Received	d	Depreciation Allowable Since Acquisition	e	Cost or Other Basis	f	Subsequent Improvements
3	Totals. . . . .										
4	Net profit or (loss) (total of columns c and d less total of columns e and f). . . . .	4		0	00			0	00		
5	<b>TOTAL GAIN OR (LOSS) FROM SALE OF REAL ESTATE, STOCKS, BONDS, ETC.</b> Add the amounts on lines 1 and 4. Enter here and on Form 40NR, page 2, Part I, line 5, columns B and C. . . . .	5		0	00			0	00		

**SCHEDULE E – Income From Rents, Royalties, Partnerships, Estates, Trusts, and S Corporations**

**PART I – Rent and Royalty Income or (Loss)**

1	Enter total income or (loss) from all rents and royalties which is not taxable to Alabama. . . . .	1		00	B	C			
2	Itemize below all rent and royalty income which is taxable to Alabama.								
a	Kind of Property & Location	b	Amount of Rent or Royalty	c	Depreciation or Depletion (attach schedule)	d	Repairs (attach itemized list)	e	Other Expenses (attach itemized list)
3	Totals (columns 2b through 2e). . . . .								
4	Net profit or (loss) (column b less sum of columns 2c through 2e). . . . .	4		0	00			0	00
5	<b>TOTAL INCOME FROM RENTS AND ROYALTIES.</b> Add the amounts on lines 1 and 4. Enter the totals here and include in line 8 below. . . . .	5		0	00			0	00

**PART II – Income or (Loss) from Partnerships, S Corporations, Estates, or Trusts**

6	List income received from partnerships, estates, trusts, and S corporations in 2023. Income from these sources not taxable to Alabama should be listed in column B only. This type income earned from Alabama sources should be listed in both columns B and C.							
	Name and Address	Check One			Employer Identification Number			
	_____	Partnership	Estate or Trust	S Corporation				
6a						00		00
6b						00		00
6c						00		00
7	<b>TOTAL INCOME OR (LOSS) FROM PARTNERSHIPS, S CORPORATIONS, ESTATES, AND TRUSTS.</b> Add the amounts on lines 6a, b, and c. Enter the totals here and include in line 8 below. . . . .	7		00				00

**PART III – Summary**

8	<b>TOTAL INCOME OR (LOSS).</b> Combine the amounts on lines 5 and 7, columns B and C. Enter here and on Form 40NR, page 2, Part I, line 6, columns B and C. . . . .	8		0	00			0	00
---	--	---	--	---	----	--	--	---	----



Alabama Department of Revenue  
**Wages, Salaries, Tips, etc.**

*Schedule W-2 must be completed fully and included with your return in order to receive proper credit for your Alabama income tax withheld. Attach a copy of all withholding statements to your return.*

NAME(S) AS SHOWN ON TAX RETURN: S KAMSALI & S MAROJU  
 PRIMARY'S SOCIAL SECURITY NO.: 848-69-5090  
 SPOUSE'S SOCIAL SECURITY NO.: 211-33-2853

A	B	C	D	E	F	G	H	I	J
Employee's Social Security Number	Employer's Identification Number (EIN)	Statutory Employee	Schedule C/C-EZ Filed?	State Code	Alabama Employer's State ID Number	Alabama State Income Tax Withheld	Federal Wages (Box 1 of Form W-2)	Alabama State Wages (Box 16 of Form W-2)	Additional Taxable Wages - Other States
1 • 848-69-5090	• 593378492	• <input type="checkbox"/>	• <input type="checkbox"/>	• OS	•	•	• 116,988	•	• 116,988
2 • 211-33-2853	• 522208088	• <input type="checkbox"/>	• <input type="checkbox"/>	• AL	• 000792222	• 104	• 5,194	• 5,194	•
3 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
4 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
5 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
6 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
7 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
8 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
9 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
10 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
11 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
12 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
13 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
14 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
15 •	•	• <input type="checkbox"/>	• <input type="checkbox"/>	•	•	•	•	•	•
16	TOTAL ALABAMA TAX WITHHELD FROM W-2s. Total lines 1-15, Column G and enter the amount here . . .					• 104			
17	ALABAMA TAX WITHHELD FROM 1099s AND W-2Gs. Enter the total Alabama Income Tax Withheld from all Form 1099s and Form W-2Gs received. See instructions on where to report the income from these statements. . . . .					• 0			
18	TOTAL WAGES AND TOTAL ALABAMA TAX WITHHELD FROM W-2s, 1099s, AND W-2Gs. See instructions. . . . .					• 104	• 122,182	• 5,194	• 116,988

**THIS SCHEDULE CAN ONLY BE SUBMITTED AND/OR PRINTED VIA LANDSCAPE**

For the year January 1 – December 31, 2023

Personal information section including names (SANGAMESHWARA CHARY, SANJANA), last names (KAMSALI, MAROJU), and address (7225 CROSSROADS GARDEN DR, ORLANDO, FL 32821).

Social security number (848695090), spouse's soc. sec. no. (211332853), and telephone number (913) 671-9337.

Table with 5 rows and 3 columns. Row 1: Alabama taxable income (4,267). Row 2: Total tax liability (150). Row 3: Total payments (104). Row 4: Refund. Row 5: Amount you owe (46).

Part II Refund and Payment Information. Includes routing number, account number, type of account (Checking/Savings), type of transaction (Direct Deposit/Debit), and Paper Check option.

Part III Declaration of Taxpayer. Includes a declaration statement and a checkbox for authorizing a representative to discuss the return.

Sign Here section with lines for taxpayer and spouse signatures and dates.

Part IV Declaration of Electronic Return Originator (ERO) and Paid Preparer. Includes a declaration statement and ERO's Use Only section.

ERO's Use Only section with fields for signature, date (02/23/2024), check if also paid preparer, and PTIN.

Paid Preparer's Use Only section with a declaration statement and fields for signature, date, and PTIN.

Paid Preparer's Use Only section with fields for signature, date (02/23/2024), check if self-employed, and PTIN.

DO NOT MAIL TO ALABAMA DEPT. OF REVENUE

## Income Worksheet

**2023**

Name as Shown on Return  
S KAMSALI & S MAROJU

Social Security Number  
848-69-5090

**Wages, Salaries, Tips, Etc for Line 5 of Form 40/40NR**

Special Type Indicator (X = Income will not be included in your return)  
Check this box to exclude income from your Alabama return.

Check this box if you are excluding income and plan to attempt to electronically file your return.

**NOTE: Part-year** residents may use this worksheet to remove non Alabama source income. Resident and Non-Resident returns may be rejected during electronic filing if you exclude income by marking boxes in the # column.

Payer's name	#	State name	Gross earnings	Alabama wages	Alabama tax withheld
DARDEN CORPORATION	<input type="checkbox"/>		116,988.	0.	
SODEXO OPERATIONS LLC	<input type="checkbox"/>	AL	5,194.	5,194.	104.
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
<b>Total</b> . . . . .			122,182.	5,194.	104.

**Other Income for Form 40/40NR**

# Special Type Indicator (X = Income will not be included in your return)  
Check this box to exclude income from your Alabama return.

Description	#	Total amount	Alabama amount
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
<b>Total</b> . . . . .			



**Dividend Income Statement**

**2023**  
**Statement** DIV

Name(s) shown on return S KAMSALI & S MAROJU	Social Security Number 848-69-5090
---	---------------------------------------

**Dividend Income and Adjustments**

Payer's Name	Federally Exempt Interest Dividends		Ordinary Dividends	Capital Gain Distributions	Nontax Distributions	Type of Adj & Adj Amt (enter as positive)	U.S. Interest Amount included in Dividends
	*	Amount					
ROBINHOOD SECURITIES LLC	<input type="checkbox"/>		200.		2.		
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						
	<input type="checkbox"/>						

\* Enter 'X' if tax-exempt for Alabama purposes

**Summary of Dividends**

<b>1</b>	Total Gross Dividends . . . . .	<u>202.</u>
<b>2</b>	Nominee and Other Adjustments . . . . .	
<b>3</b>	Exempt-Interest Dividends . . . . .	
<b>4</b>	US Interest Amount Included in Dividends (net) . . . . .	
<b>5</b>	Total Adjustment Amount . . . . .	
<b>6</b>	Subtotal (Line 1 less Line 5) . . . . .	<u>202.</u>
<b>7</b>	Capital Gains (net) . . . . .	
<b>8</b>	Nontaxable Distributions (net) . . . . .	<u>2.</u>
<b>9</b>	Total of Line 7 and Line 8 . . . . .	<u>2.</u>
<b>10</b>	Net Dividend Income (Line 6 less Line 9) . . . . .	<u>200.</u>