# Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

## IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

- Internal ne	evenue dervice						
Submis	sion Identification Number (SID)						
Taxpayer'	's name		Social se	curity nur	nber		
SUNI	L KUMAR SWARNA		744-	60-01	68		
Spouse's			Spouse's	social se	curity r	number	
Part I	Tax Return Information — Tax Year Ending December 31, 2023	(Enter	vear vo	u are a	uthor	izina )	
	rhole dollars only on lines 1 through 5.	(Littor	your yo	u uic u	atrioi	<u>ızırıg.</u> ,	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
	Adjusted gross income			.   1		118,	629.
	Total tax						,546.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			. 3			802.
	Amount you want refunded to you						256.
5	Amount you owe			. 5			
Part I		t and ke	eep a c	opy of	your	retur	n)
return (o to send for any o Agent to payment authoriza payment business taxes to personal	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Pairiginal or amended) I am now authorizing. I consent to allow my intermediate service provider my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason belay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accuse to finy federal taxes owed on this return and/or a payment of estimated tax, and the financial ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the tit, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellate a days prior to the payment (settlement) date. I also authorize the financial institutions involve receive confidential information necessary to answer inquiries and resolve issues related I identification number (PIN) below is my signature for the income tax return (original or amen in Funds Withdrawal Consent.	, transmiting for rejective the U.S. count indiction institution requestion requestion the part of the	ter, or election of the still o	ectronic rectronic rectronic ry and its the tax property or its entry or its be rectly of the further a	eturn on ission of the control of th	originator, (b) the nated Fon soft s according voke (cono later payvledge	or (ERO) e reason inancial ware for unt. This ancel) a r than 2 ment of that the
	ver's PIN: check one box only					T.	
$\boxtimes$	I authorize GLOBAL TAXES LLC to enter or ge	nerate m	ıv PIN	0 0	1 6	8	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.		.,	Enter fiv don't en			,
	I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PI below.						
Your si	gnature ▶ Da	ate►					
Snouse	e's PIN: check one box only						
	I authorize to enter or ge	norato m	ov DINI				as my
Ш	ERO firm name	ilerate ii	19 1 114	Enter fiv	e diaits	. but	as my
	signature on the income tax return (original or amended) I am now authorizing.			don't en			
	I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PI below.						
Spouse	e's signature ► Da	ate <b>&gt;</b>					
	Practitioner PIN Method Returns Only—continue	below					
Part II	Certification and Authentication — Practitioner PIN Method Only						
FRO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2	2 4	9 6 0	) 8	2 7	1
21100	El Hart Hat Elitor your one digit El Ha followou by your live digit con colocted i ha.			enter all			
authorize	that the above numeric entry is my PIN, which is my signature for the electronic individual in ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I an ents of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providence.	m submit	ting this	return in	accor	dance	
ERO's	signature ► Da	ate <b>&gt;</b>					
	ERO Must Retain This Form — See Instructi						
	Don't Submit This Form to the IRS Unless Requeste		o So				

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



For the year Jan	ı. 1–Dec	a. 31, 2023, or other tax year beginning		, 2023, end	ling		, 20		See s	eparate i	instructions.
Your first name	and m	iddle initial	Last na	ame					Your	social sec	curity number
SUNIL KU	JMAR		SWAF	RNA					744	1 60	0168
If joint return, s	pouse's	s first name and middle initial	Last na	ame					Spous	e's social	security number
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Apt. no	).	Presid	lential Ele	ection Campaign
210 TERF	RACE	AVENUE					1				ou, or your
City, town, or p											jointly, want \$3 nd. Checking a
JERSEY (	CITY				NJ	7	07307		1 0		not change
Foreign country	/ name			Foreign province/state/o	count	у	Foreign post	al cod	e your t	ax or refu	ınd.
										Yo	ou Spouse
Filing Status	; X	Single				☐ Head of he	ousehold (H	IOH)			
Check only		Married filing jointly (even if only or	ne had	income)							
one box.		Married filing separately (MFS)				Qualifying	surviving s	pous	e (QSS)		
	lf y	ou checked the MFS box, enter the	name (	of your spouse. If you	u che	cked the HOF	or QSS bo	x, en	ter the c	hild's na	me if the
	qu	alifying person is a child but not you	ır deper	ndent:							
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	pavn	nent for prope	rtv or servi	ces): (	or (b) sel		
Assets		ange, or otherwise dispose of a digi								Y€	es 🛛 No
Standard	Som	eone can claim:	penden	t Your spouse	e as a	a dependent			-		
Deduction		Spouse itemizes on a separate return		•	alien	·					
Ago/Plindnoo		Were born before January 2, 1	050 [	Are blind <b>Cne</b>		. Non hor	n before Ja	nuon	, 2 1050		- blind
			909 [	<u> </u>	ouse:		(4) Ob -		•		s blind (see instructions):
Dependents		instructions): irst name Last name		(2) Social security number	′	(3) Relationsh to you	iip		credit	1	or other dependents
If more	(1) [	rist name Last name		number		to you			Orcan	Orcanio	
than four dependents,										+	<del>-</del>
see instructions	s —										
and check here	1									-	
-	1a	Total amount from Form(s) W-2, bo	ov 1 (sc	e instructions)	I				1	la	136,637.
Income	b		•	,						lb	130,037.
Attach Form(s)	C	Household employee wages not reported on Form(s) W-2								lc	
W-2 here. Also attach Forms	d									ld	
W-2G and	e		Taxable dependent care benefits from Form 2441, line 26  Employer-provided adoption benefits from Form 8839, line 29							le	
1099-R if tax was withheld.	f	•								1f	
If you did not	g	Wages from Form 8919, line 6 .							_	lg	
get a Form	h	Other earned income (see instructi								lh	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,			l 1i					-
	z	A statition and a thematicals of the							. 1	Iz	136,637.
Attach Sch. B	2a	· 1	2a		<b>b</b> Ta	axable interest	t		. 2	2b	89.
if required.	За	Qualified dividends	3a	2.	<b>b</b> O	rdinary divider	nds		. 3	Bb	2.
	4a	IRA distributions	4a		<b>b</b> Ta	axable amoun	t		. 4	lb	
Standard Deduction for—	5a	Pensions and annuities	5a		<b>b</b> Ta	axable amoun	t		. 5	5b	
Single or	6a	Social security benefits	6a		<b>b</b> Ta	axable amoun	t		. 6	6b	
Married filing separately,	С	If you elect to use the lump-sum el	lection	method, check here	(see i	instructions)					
\$13,850	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7	-169.	
Married filing jointly or	8	Additional income from Schedule	1, line 1	0						8	-17,930.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	come					9	118,629.
\$27,700	10	Adjustments to income from Schee	dule 1,	line 26					. 1	10	
Head of household,	11	Subtract line 10 from line 9. This is	your <b>a</b>	djusted gross incon	ne				. 1	11	118,629.
\$20,800 If you checked <sub>r</sub>	12	Standard deduction or itemized	deduct	tions (from Schedule	A)				. 1	12	13,850.
any box under Standard	13	Qualified business income deducti	on fron	n Form 8995 or Form	899	5-A			. 1	13	
Deduction,	14	Add lines 12 and 13							. 1	14	13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our <b>t</b>	axable incom	ne		.   1	15	104,779.

Form 1040 (2023	3)								Page Z
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	18,546.
Credits	17	Amount from Schedule 2, lin	ne 3					17	
	18	Add lines 16 and 17						18	18,546.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0				22	18,546.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	18,546.
<b>Payments</b>	25	Federal income tax withheld	I from:						
	а	Form(s) W-2				<b>25a</b> 22	2,802		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	22,802.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 return			26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27			
attacii ocii. Lio.	28	Additional child tax credit from	m Schedule 8812	!		28			
	29	American opportunity credit	from Form 8863	3, line 8 .     .		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	22,802.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amour	nt you <b>overpaid</b>		34	4,256.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	k here	. 🗆	35a	4,256.
Direct deposit?	b	Routing number 0 2 1		<del></del>	<b>c</b> Type:	Checking	Savings		
See instructions.	d	Account number 3 1 3	8 3 1 5	6 9					
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	
	38	Estimated tax penalty (see in	_	-		38			
Third Party		you want to allow another							
Designee		,	•				omplete	below.	<b>X</b> No
Ü		esignee's		Phone Personal ic					
		me		no.			ber (PIN)		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com			, , ,		,		,
Here			ipicic. Deciaration	· · · · ·	, <i>, ,</i>	sea on an imormati			, ,
	Yo	Your signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE ENGINEER				,
See instructions.		Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupation	on			nt your spouse an
Keep a copy for your records.					ntity Prote inst.)	ection PIN, enter it here			
	Ph	one no. (201)920-042	2	Email address	ssunilkumar(	309@gmail.c	om		
Paid	Pr	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYA	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/10/2024	P0208	3 <u>27</u> 03	Self-employed
Preparer	Fir	m's name GLOBAL TA	XES LLC				Pho	one no. (	(678)965-9522
Use Only	Firm's address 245 ROONEY CT E BRU			JNSWICK NJ 08816				n's EIN	84-3171965

# SCHEDULE 1 (Form 1040)

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

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

SUNIL KUMAR SWARNA

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

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

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

Sequence No. 01

Your social security number
744-60-0168

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ich Schedule E .	5	-17,930.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ( )		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ( )	-	
t	Pension or annuity from a nonqualifed deferred compensation plan or	04		
	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 as through az	8z	9	
9 10	Total other income. Add lines 8a through 8z		9	
10	1040. 1040-SR, or 1040-NR, line 8		10	-17,930.
	1070. 1070 011. 01 1070 NH 1. IIIO U			

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

Par	t II Adjustments to Income				
11	Educator expenses			. 11	
12	Certain business expenses of reservists, performing artists, and fee-				
	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				
16	Self-employed SEP, SIMPLE, and qualified plans				
17	Self-employed health insurance deduction				
18	Penalty on early withdrawal of savings				
19a	Alimony paid				
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				Į.
20	IRA deduction				
21	Student loan interest deduction				
22	Reserved for future use				
23	Archer MSA deduction			. 23	
24	Other adjustments:				
а	,	24a			
b	Deductible expenses related to income reported on line 8l from the				
		24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	· · · · · · · · · · · · · · · · · · ·	24c			
d	the state of the s	24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h			
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				
	<del>-</del>	24i			
j		24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
		24k			
Z	Other adjustments. List type and amount:				
		24z			Į.
25	Total other adjustments. Add lines 24a through 24z				
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	r here and	on <b>26</b>	
	1 OITH 1070, 1070-011, 01 1070-1111, IIIIC 10	• •		.   20	

#### **SCHEDULE D** (Form 1040)

### **Capital Gains and Losses**

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

	al Revenue Service Go to www.irs.gov/ScheduleD	for instructions and	the latest informat	ion.	3	Sequence No. <b>12</b>
	(s) shown on return NIL KUMAR SWARNA					ecurity number
	you dispose of any investment(s) in a qualified opportunity	y fund during the ta	ax year?			0100
If "Y	es," attach Form 8949 and see its instructions for addition	nal requirements fo	r reporting your ga	ain or loss.		
Pa	rt I Short-Term Capital Gains and Losses – G	enerally Assets	Held One Year	or Less (se	e ins	tructions)
lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmento 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, line 2, colum	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		201			1.0
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked	231.	221.			10.
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	(loss) from Forms 4	1684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	rusts from	5	
6	Short-term capital loss carryover. Enter the amount, if a <b>Worksheet</b> in the instructions	ny, from line 8 of y	our Capital Loss	Carryover	6	( )
7	Net short-term capital gain or (loss). Combine lines 1 term capital gains or losses, go to Part II below. Otherwis			e any long- 	7	10.
Pai	t II Long-Term Capital Gains and Losses—Ge	enerally Assets I	Held More Than	One Year	(see	instructions)
lines	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss	from	(h) Gain or (loss) Subtract column (e) from column (d) and
	e dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colum		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 $\textbf{Box}\ \textbf{D}$ checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked	390.	569.			-179.
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
	Gain from Form 4797, Part I; long-term gain from Form from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corpora	ations, estates, and	trusts from Sched	dule(s) K-1	12	1

14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

13

14

15

Schedule D (Form 1040) 2023 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -169.• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet . . . . . . . . . . . . . . . . . . 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . . . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 169.) 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

# 8949

Department of the Treasury

Internal Revenue Service

### Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074 Attachment

Sequence No. 12A

Name(s) shown on return SUNIL KUMAR SWARNA Social security number or taxpayer identification number

744-60-0168

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

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss) (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired (sales price) disposed of and see Column (e) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions. with column (g). instructions ROBINHOOD SECURITIES LLC 01/01/22 12/31/23 231. 221. 10. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract

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.

231.

10.

negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

above is checked), or line 3 (if Box C above is checked) .

221.

Form 8949 (2023) Attachment Sequence No. **12A** Page **2** 

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

Social security number or taxpayer identification number 744-60-0168

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-ter	rm transactions rep	orted on Form(s) 1	1099-B showing	basis was repo	orted to the IRS	(see Note above)
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🗵 (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

	Į		(F	Long-term	transactions	not re	ported to	you on	Form	1099-B
--	---	--	----	-----------	--------------	--------	-----------	--------	------	--------

(F) Long-term transactions	not reported	to you on Fc	JIII 1099-D				
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD CRYPTO LLC	01/01/22	12/31/23	390.	569.			-179.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D)	I here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	390.	569.			-179.

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

#### **SCHEDULE E** (Form 1040)

#### **Supplemental Income and Loss**

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

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

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

SUN:	IL KUMAR SWARNA					744-6	50-0168	3
Par	Income or Loss From Rental Real Estate ar	nd Royalti	es					
	Note: If you are in the business of renting personal prope	erty, use <b>Sch</b>	edule C. S	See inst	ructions. If you	are an indi	ividual, rep	oort farm
	rental income or loss from <b>Form 4835</b> on page 2, line 40.		( ) 1000					57.1
	Did you make any payments in 2023 that would require you							
<u>B</u>	If "Yes," did you or will you file required Form(s) 1099? .						. <u>  Y</u>	es
1a	Physical address of each property (street, city, state, ZI	P code)						
A	BYPASS ROAD OPPOSITE KHAMMAM TELANGANA	A IN 507	7002					
В								
С								
1b	Type of Property 2 For each rental real estate property	erty listed			Fair Rental	Perso	nal Use	0.11/
	(from list below) above, report the number of fair				Days	Da	ays	QJV
Α	personal use days. Check the Q		У А		365		0	
В	if you meet the requirements to qualified joint venture. See instru		В					
С	qualified joint venture. See instit	uctions.	С	;				
Type	of Property:							
1	Single Family Residence 3 Vacation/Short-Term Ren	ntal 5	Land		7 Self-Rental			
2	Multi-Family Residence 4 Commercial	6	Royalties	;	8 Other (desc	cribe)		
					Proper			
Incor	ne·		Α		В			С
3	Rents received	3		600				
4	Royalties received	4						
Expe								
5	Advertising	5						
6	Auto and travel (see instructions)	6						
7	Cleaning and maintenance	7	1	,361				
8	Commissions	8		-				
9	Insurance	9						
10	Legal and other professional fees	10						
11	Management fees	11	1	,035				
12	Mortgage interest paid to banks, etc. (see instructions)	12						
13	Other interest	13						
14	Repairs	14	3	,694				
15	Supplies	15	3	,851				
16	Taxes	16						
17	Utilities	17		,242	_			
18	Depreciation expense or depletion	18	4	,347	•			
19	Other (list)	19						
20	Total expenses. Add lines 5 through 19	20	18	,530				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If							
	result is a (loss), see instructions to find out if you must			000				
	file Form 6198	21	-17	,930	•			
22	Deductible rental real estate loss after limitation, if any,			000				
	on Form 8582 (see instructions)	22 (	17,	930.		(0.00	1	
23a	Total of all amounts reported on line 3 for all rental properties			23		600.	-	
b	Total of all amounts reported on line 4 for all royalty prop			23			-	
C	Total of all amounts reported on line 12 for all properties			23	_	1 2 4 17	-	
d	Total of all amounts reported on line 18 for all properties			23		4,347.	-	
e	Total of all amounts reported on line 20 for all properties			23	e   1	8,530.		
24	Income. Add positive amounts shown on line 21. <b>Do no</b>		-			. 24	/	17 020
25	Losses. Add royalty losses from line 21 and rental real estat						1	17,930.
26	Total rental real estate and royalty income or (loss). here. If Parts II, III, and IV, and line 40 on page 2 do no							
	Schedule 1 (Form 10/0) line 5 Otherwise include this a		•			011		_17 930

# Form **4562**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

### **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Business or activity to which this form relates

2023
Attachment
Sequence No. 179

Identifying number

OMB No. 1545-0172

SUNIL KUMAR SWARNA Sch E BYPASS ROAD OPPOSITE 744-60-0168 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1,160,000. 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2,890,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . . . . . . . . . . . . . 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 . . . . . . . . . . . 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 . . . . . . . . . . 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 . . . . . . . . . . . . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 . . . . . . . . 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property h Residential rental 27.5 yrs. MM S/L 01/23 4,347. 124,751. S/L 27.5 yrs. MM property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. **b** 12-year ММ S/L c 30-year 30 yrs. ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 4,347. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.