Internal Revenue Service

### **IRS e-file Signature Authorization**

OMB No. 1545-0074

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

Submission Identification Number (SID)

Taxpayer's name	Soc	cial security number
VENUMADHAV R JOGINIPELLI	7	254-52-3396
Spouse's name	Spo	ouse's social security number
MANASA JUVVADI	8	313-49-1118
Part I Tax Return Information – Tax Year Ending December 31,	2023 (Enter yea	ar you are authorizing.)
Enter whole dollars only on lines 1 through 5.		
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
<b>1</b> Adjusted gross income		1   61,283
<b>2</b> Total tax		2 3,589
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 6,743
4 Amount you want refunded to you		4 3,154
<b>5</b> Amount you owe		5

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

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

#### Taxpayer's PIN: check one box only

<u>.</u>				ERO firm name		Er
X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	

2	3	3	9	6	00 mV
Ent dor	er fiv n't er	/e di iter a	gits, all ze	but	as my

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

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

Your signature

#### Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC ERO firm name to enter or generate my PIN

Date

9	1	1	1	8	as my
	er fiv n't er				

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

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

Spouse's signature >	Date				 			
Practitioner PIN Method Returns Only—cont	inue be	low	,					
Part III Certification and Authentication – Practitioner PIN Method O	nly							
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PI	1. 2	2	2		0 {	_	2 7	1

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

ERO's signature ►		Date 🕨	
	Retain This Form — See I Form to the IRS Unless R		
E. D	and the stand the second		E 9970 (D 01 0001)

<b>1040</b>		artment of the Treasury—Internal Revenue Servi <b>S. Individual Income Ta</b> >		turn	202	23	OMB No. 1545	-0074	IRS Use Only	y−Do not w	rite or sta	aple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, ei	nding			, 20	See se	parate i	instructions.
Your first name	and m	iddle initial	Last r	ame						Your so	cial sec	urity number
VENUMADH	IAV I	R	JOG	INIPEI	T.T							3396
-		s first name and middle initial	Last r									security number
MANASA			עטד	VADI						813	49	1118
-	(numbe	er and street). If you have a P.O. box, see						A	pt. no.			ection Campaigr
54 KNIGH	ITS I	BRG						I	)	Check I	here if y	ou, or your
-		ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP c	ode	1 1	0.	jointly, want \$3
GUILDERI	AND					NY	Y	120	84			nd. Checking a not change
Foreign country	name			Foreign p	rovince/state	e/coun	ty	Foreig	n postal code			0
											Yo	ou 🗌 Spouse
Filing Status	; [	] Single					Head of h	ouseh	old (HOH)			
Check only		Married filing jointly (even if only o	ne hac	l income)								
one box.		] Married filing separately (MFS)					Qualifying	surviv	ing spouse	(QSS)		
	lf y	ou checked the MFS box, enter the	name	of your s	pouse. If y	ou che	ecked the HOF	l or Q	SS box, ent	er the ch	ild's na	me if the
	qu	alifying person is a child but not you	ır depe	endent:								
Digital	At ar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d, award, c	r payr	ment for prope	rty or	services); oi	r (b) sell,		
Assets		ange, or otherwise dispose of a digi						-	,		🗌 Ye	es 🛛 No
Standard	Som	<b>eone can claim:</b> 🗌 You as a de	pende	nt 🗌	Your spou	se as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-statu	s alier	า					
Age/Blindness	You	: 🗌 Were born before January 2, 1	959	Are bl	lind Sp	oouse	: 🗌 Was bor	n befo	ore January	2, 1959	🗌 ls	s blind
Dependents	s (see	instructions):		(2) 5	Social securi	ty	(3) Relationsh	ip (4	) Check the b	ox if quali	ifies for (	(see instructions):
If more	<b>(1)</b> F	irst name Last name			number		to you		Child tax c	redit	Credit fo	or other dependents
than four												
dependents, see instructions												
and check	, 											
here 🗌												
Income	1a	Total amount from Form(s) W-2, be	•		,					. 1a		87,554.
Attach Form(s)	b	Household employee wages not re	•							. <u>1b</u>		
W-2 here. Also	c	Tip income not reported on line 1a						• •		· 10	-	
attach Forms W-2G and	d		Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
1099-R if tax	e	Taxable dependent care benefits f				• •		• •	· · ·	. 1e		
was withheld.	f	Employer-provided adoption bene			,			• •		. 1f		
lf you did not get a Form	g	Wages from Form 8919, line 6 .				• •		• •		. 1g		0.
W-2, see	h :	Other earned income (see instruction		•••••		• •	 <b>  1</b> i	· ·	· · ·	. 1h		0.
instructions.	i -	Nontaxable combat pay election (s Add lines 1a through 1h	see ins	structions)		• •	🛛 🗖			. 1z		87,554.
	 2a	Ŭ	2a		· · ·	 ьт	axable interest	· ·		· 12		07,551.
Attach Sch. B if required.	2a 3a	•	2a 3a		1.		Drdinary divide			. 20		1.
	<u> </u>		3a 4a				axable amoun			. 30		±•
Standard	ча 5а		4a 5a				axable amoun			. 40		
<ul> <li>Deduction for —</li> <li>Single or</li> </ul>	6a		6a				axable amoun			. 6b		
Married filing	c	, _		method								
separately, \$13,850	separately,							7		-462.		
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule								. 8		-25,810.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	·							. 9		61,283.
surviving spouse, \$27,700	10	Adjustments to income from Sche					• • • • •			. 10	)	
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is								. 11		61,283.
\$20,800	12	Standard deduction or itemized	-	-	-					. 12		27,700.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deducti				,	95-A			. 13	-	,,,,,,,,
Standard Deduction,	14	Add lines 12 and 13								. 14		27,700.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ss, enter	-0 This is	your	taxable incom	ie .		. 15		33,583.

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

Form **1040** (2023)

Form 1040 (2023	3)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3 🗌		16	3,589.
Credits	17	Amount from Schedule 2, lin	ie3					17	
	18	Add lines 16 and 17						18	3,589.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ie8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	3,589.
	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 total tax					24	3,589.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				<b>25a</b> 6	,743.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	6,743.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	22 return			26	
qualifying child,	27	Earned income credit (EIC)		••		27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	B. line 8		29			
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31.				-		32	
	33	Add lines 25d, 26, and 32. T						33	6,743.
Refund	34	If line 33 is more than line 24						34	3,154.
neruna	35a	Amount of line 34 you want				, .		35a	3,154.
Direct deposit?	b	Routing number 0 5 1					Savings		
See instructions.	ď	Account number 4 3 5					Caringo		
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24							
You Owe	51	For details on how to pay, g						37	
	38	Estimated tax penalty (see in	÷	-		38			
Third Party		you want to allow another							
Designee							omplete be	elow.	× No
Deelightee	De	signee's		Phone			onal identific		
	nar			no.		num	ber (PIN)		
Sign		der penalties of perjury, I declare th							
Here	bel	ief, they are true, correct, and com	plete. Declaration of	ot preparer (otne	r than taxpayer) is ba	ased on all information			, ,
	Yo	ur signature		Date	Your occupation				nt you an Identity
Joint return?					SOFTWARE I		(see ir		IN, enter it here
See instructions.	Sp	ouse's signature. If a joint return, <b>k</b>	ooth must sign.	Date	Spouse's occupat		If the I	RS ser	nt your spouse an
Keep a copy for	Op	ouoo o olghalaro. Il a joint rolani, k		Duto					ection PIN, enter it here
your records.					SOFTWARE (	CONSULTANT	(see in	ist.)	
	Ph	one no. (732)421-497	5	Email address	VENU29J@GN	MAIL.COM			
	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM <u>S</u> AGAR	GUPTA TALLAM	03/10/2024	P02082	703	Self-employed
Preparer	Fin	n's name GLOBAL TAX	XES LLC				Phone	∍no. (	678)965-9522
Use Only	Fin	n's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's	EIN	84-3171965
Go to www.irs.go	ov/Forn	1040 for instructions and the late	st information.		BAA	REV 03/04/24 PRO			Form <b>1040</b> (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

## Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

 

 Iatest information.
 Attachment Sequence No. 01

 Your social security number 754-52-3396

Internal Revenue Service	Go to www.irs.gov/Fo
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR

VENUMADHAV	R	JOGINIPELLI	&	MANASA	JUVVADI

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	-25,810.
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach So	chedule E .	5	
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss		)	
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555		)	
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
	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)			
	Section 951(a) inclusion (see instructions)         8n		-	
0	Section 951A(a) inclusion (see instructions)		-	
р	Section 461(I) excess business loss adjustment		-	
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		4	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan		-	
u _	Wages earned while incarcerated		-	
z	Other income. List type and amount:			
9	Total other income. Add lines 8a through 8z		9	
9 10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter here		3	
10	1040, 1040-SR, or 1040-NR, line 8		10	-25,810.
For Pa	perwork Reduction Act Notice, see your tax return instructions.	· · · · ·		e 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis	government		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a			19a	
b	Recipient's SSN			
c	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:		20	
<u>-</u>	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the			
D	rental of personal property engaged in for profit			
-	Nontaxable amount of the value of Olympic and Paralympic medals			
С	and USOC prize money reported on line 8m.			
h			-	
d			-	
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974		-	
f	Contributions to section 501(c)(18)(D) pension plans		-	
g	Contributions by certain chaplains to section 403(b) plans 24g		-	
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)		-	
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
_	tax law violations		-	
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
Z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV 03	3/04/24 PRO	Schedule 1 (F	orm 1040) 202

SCHEDULE	С
(Form 1040)	

# Profit or Loss From Business (Sole Proprietorship)

OMB	No.	1545-0074	

.... . . . .

	nent of the freasury				uctions and the latest information		Attachment Sequence No. 09
Name	of proprietor		· · · · · · · · · · · · · · · · · · ·			Social s	security number (SSN)
	JMADHAV R JOGINIPEL	LI				754-	52-3396
A	Principal business or profession	on, incl	luding product or service (se	e instr	uctions)	B Enter	code from instructions
	SOFTWARE SERVICES					5	1 9 2 0 0
С	Business name. If no separate	busin	ess name, leave blank.			1	oyer ID number (EIN) (see instr.)
	SOFTWARE SERVICES						
Е	Business address (including s	uite or	room no.) 54 KNIGH	ITS I	BRG , Apt. D		
	City, town or post office, state				, NY 12084		
F	0 17 1	K Cas			Other (specify)		
G					2023? If "No," see instructions for	imit on los	sses . 🗙 Yes 🗌 No
н							
I					n(s) 1099? See instructions		
J		e requi	red Form(s) 1099?				🗌 Yes 🗌 No
Par							
1	-				f this income was reported to you o		
-		• •			d	1	
2						. 2	
3						. 3	
4						. 4	
5					· · · · · · · · · · · ·		
6	•		Ũ		refund (see instructions)		
7 Part	Gross Income. Add lines 5 an	10.6	es for business use of yo	· ·		. 7	
8	Advertising	8		18	Office expense (see instructions)	. 18	
	0	0		19	Pension and profit-sharing plans		
9	Car and truck expenses (see instructions)	9	9,515.	20	Rent or lease (see instructions):	. 19	
10	Commissions and fees .	10	<u>_</u>	20 a	Vehicles, machinery, and equipmen	t <b>20a</b>	
11	Contract labor (see instructions)	11		b	Other business property		12,250.
12	Depletion	12		21	Repairs and maintenance		11/2001
13	Depreciation and section 179			22	Supplies (not included in Part III)		
	expense deduction (not			23	Taxes and licenses		
	included in Part III) (see instructions)	13		24	Travel and meals:		
14	Employee benefit programs			a	Travel	. 24a	
	(other than on line 19)	14		b	Deductible meals (see instructions	) <b>24b</b>	3,445.
15	Insurance (other than health)	15		25	Utilities	. 25	600.
16	Interest (see instructions):			26	Wages (less employment credits)	26	
а	Mortgage (paid to banks, etc.)	16a		27a	Other expenses (from line 48) .	. 27a	
b	Other	16b		b	Energy efficient commercial bldg	s	
17	Legal and professional services	17			deduction (attach Form 7205) .	. 27b	
28	Total expenses before expen	ises fo	r business use of home. Add	lines	8 through 27b	. 28	25,810.
29	Tentative profit or (loss). Subtr	ract lin	e 28 from line 7			. 29	-25,810.
30		-	-	e expe	enses elsewhere. Attach Form 8829	9	
	unless using the simplified me			( )			
	Simplified method filers only			(a) you		-	
	and (b) the part of your home				. Use the Simplified		
04	Method Worksheet in the inst		-	ter on	line 30	. 30	
31	Net profit or (loss). Subtract			•			
	• If a profit, enter on both <b>Sch</b> checked the box on line 1, see	e instru				31	-25,810.
	• If a loss, you <b>must</b> go to line				J		
32	If you have a loss, check the b	box tha	at describes your investment	in this	s activity. See instructions.		
	<ul> <li>If you checked 32a, enter th SE, line 2. (If you checked the Form 1041, line 3.</li> <li>If you checked 32b, you mu</li> </ul>	box or	n line 1, see the line 31 instruc	tions.)	Estates and trusts, enter on	32a 🔉 32b 🗌	<ul> <li>All investment is at risk.</li> <li>Some investment is not at risk.</li> </ul>

• If you checked 32b, you must attach Form 6198. Your loss may be limited.

For Paperwork Reduction Act Notice, see the separate instructions.

Scheut	e C (Form 1040) 2023			Page <b>2</b>
Part	Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory: <b>a</b> Cost <b>b</b> Lower of cost or market <b>c</b> Other (at	ach e	(planation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing invente If "Yes," attach explanation		. 🗌 Yes	🗌 No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		
Part				
43 44	When did you place your vehicle in service for business purposes? (month/day/year) $01/01/2021$ Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your	vehicl	e for:	
а	Business 14,526 b Commuting (see instructions) 4,522 c	Other		1,843
45	Was your vehicle available for personal use during off-duty hours?		🗌 Yes	🗙 No
46	Do you (or your spouse) have another vehicle available for personal use?		🗙 Yes	🗌 No
47a	Do you have evidence to support your deduction?		🗌 Yes	🗙 No
b	If "Yes," is the evidence written?		🗌 Yes	No
Part	V Other Expenses. List below business expenses not included on lines 8–26, line	27b,	or line 30.	
48	Total other expenses. Enter here and on line 27a	48		

#### SCHEDULE D (Form 1040)

## **Capital Gains and Losses**

OMB No. 1545-0074

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

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

Attachment Sequence No. **12** 

20

Internal Revenue Service Name(s) shown on return

Department of the Treasury

VENUMADHAV R JOGINIPELLI & MANASA JUVVADI

Your social security number 754-52-3396

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)

(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
13,348.
12.
( 5,614.)
7,746.

#### 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.		<b>(d)</b> Proceeds	<b>(e)</b> Cost	<b>(g)</b> Adjustmen		(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.		(sales price)	(or other basis)	to gain or loss Form(s) 8949, I line 2, colum	Part II,	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b .					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked	160,722.	166,509.	4,3	804.	-1,483.
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked	1,023.	2,631.			-1,608.
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824					
12		.,	12 13			
13						
14	Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover</b> <b>Worksheet</b> in the instructions				14	( 5,117.)
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•			15	-8,208.

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	<b>16</b> -462.
	• If line 16 is a <b>gain</b> , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is <b>zero</b> , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 <b>both</b> gains?	
	<b>No.</b> Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	<ul> <li>Are lines 18 and 19 both zero or blank and you are not filing Form 4952?</li> <li>Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.</li> </ul>	
	☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	<ul> <li>The loss on line 16; or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	<b>21</b> ( 462.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

BAA REV 03/04/24 PRO

Schedule D (Form 1040) 2023

Form <b>8949</b>
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Department of the Treasury

Internal Revenue Service

## Sales and Other Dispositions of Capital Assets

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



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

Name(s) shown on return	Social security number or taxpayer identification number
VENUMADHAV R JOGINIPELLI & MANASA JUVVADI	754-52-3396

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

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

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

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

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

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

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

1 (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	ate sold or Proceeds S	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 <i>Column</i> (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).	
Robinhood Securities LLC	01/01/23	12/31/23	53,122.	32,564.	EW	-7,210.	13,348.	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).		53,122.	32,564.		-7,210.	13,348.		

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

Form 8949 (2023)	Attachment Sequence No. 12A	Page <b>2</b>
Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side	Social security number or taxpayer identification num	ber

VENUMADHAV R JOGINIPELLI & MANASA JUVVADI

Social security number or taxpayer identification number 754-52-3396

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	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or disposed of	<b>(d)</b> Proceeds (sales price)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e)	See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	combine the result with column (g).
Robinhood Securities LLC	01/01/22	12/31/23	160,722.	166,509.	W	4,304.	-1,483.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	I here and inc is checked), <b>lir</b>	lude on your <b>1e 9</b> (if <b>Box E</b>	160,722.	166,509.		4,304.	-1,483.

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.

Form <b>8949</b>	
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Department of the Treasury

Internal Revenue Service

## Sales and Other Dispositions of Capital Assets

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



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

Name(s) shown on return	Social security number or taxpayer identification number
VENUMADHAV R JOGINIPELLI & MANASA JUVVADI	754-52-3396

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.

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

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

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

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis See the <b>Note</b> below	If you enter an enter a co	f <b>any, to gain or loss</b> amount in column (g), ode in column (f). <b>arate instructions.</b>	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see <i>Column (e)</i> in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	
Robinhood Crypto LLC	01/01/23	12/31/23	37.	25.			12.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and inc e is checked), <b>lir</b>	lude on your ne 2 (if Box B	37.	25.			12.

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

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

Form 8949 (2023)	Attachment Sequence No. 12A	Page <b>2</b>
Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side	Social security number or taxpayer identification num	ber

VENUMADHAV R JOGINIPELLI & MANASA JUVVADI

Social security number or taxpayer identification number 754-52-3396

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)

- X (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	<b>(b)</b> Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	See the separate instructions.		(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Ćo.)	(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	1,023.	2,631.			-1,608.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	I here and inc is checked), <b>lir</b>	lude on your 1e 9 (if Box E	1,023.	2,631.			-1,608.

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.

## Additional Information From 2023 Federal Tax Return

## Schedule C (SOFTWARE SERVICES): Profit or Loss from Business

Line 20b	Itemization Statement
Description	Amount
RENTAL EXPENSES	12,250.
Total	12,250.

## Schedule C (SOFTWARE SERVICES): Profit or Loss from Business

Line 25	Itemization Statement
Description	Amount
INTERNET BILL(\$50P.M*12M)	600.
Total	600.