Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

Social accurity number

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

Taxpayer s hame	Social security number				
KRISHNA SRI HARSHA DEVARAKONDA	098-65-1331				
Spouse's name	Spouse's social security number				
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	er year 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.					
1 Adjusted gross income	1 98,848.				
2 Total tax	2 14,002.				
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 18,348.				
4 Amount you want refunded to you	. 4 4,346.				
5 Amount you owe	5				
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy of your return)				
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended	d) 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

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

5	1	3	3	1					
Enter five digits, but don't enter all zeros									

my

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

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

Your signature

Date 🕨

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Enter five digits, but don't enter all zeros

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

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

Spouse's s	ignature D	ate 🕨	•								
Practitioner PIN Method Returns Only—continue below											
Part III	Certification and Authentication – Practitioner PIN Method Only										
ERO's EFII	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2			 6 nter a		2	7	1	

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

ERO's signature ►		Date 🕨	
	ERO Must Retain This Form — Se Ibmit This Form to the IRS Unless		
For Demonstrade Deduction Act Nation and		BEN 00/00/04 BBO	Farm 8870 (Day, 01 0001)

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

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		turn	202	3	OMB No. 1545-	-0074	IRS Use Only	y−Do not v	/rite or sta	aple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	ame						Your so	cial sec	curity number
KRISHNA	SRI	HARSHA	DEV	ARAKON	JDA					098	65	1331
-		s first name and middle initial	Last r									l security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.	Preside	ntial Ele	ection Campaigr
112 GOLI	DENR	OD CT										ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP co	ode		0	jointly, want \$3 nd. Checking a
LOCUST						NC	-	280	97	1 0		not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your ta:	_	_
		۹									∐ Yo	ou Spouse
Filing Status	; 🗵	Single		、			Head of ho	buseh	old (HOH)			
Check only		Married filing jointly (even if only on the second se	ne had	l income)								
one box.	L If y	Married filing separately (MFS) you checked the MFS box, enter the	namo	of your o	nouse If you	1 obc	, ,		ring spouse	. ,	ild'e na	mo if the
		alifying person is a child but not you									iiu s na	
Digital		ny time during 2023, did you: (a) rec	•						,.	()		
Assets		hange, or otherwise dispose of a dig					-	t)? (Se	e instructio	ns.)		es 🛛 No
Standard Deduction	_	eone can claim: You as a de					a dependent					
		Spouse itemizes on a separate retur		ou were a	dual-status	allen						
		Were born before January 2, 1	959	Are bl	lind Spo	ouse	: 📋 Was bor		ore January			s blind
Dependents				(2) 5	Social security number	/	(3) Relationsh	ip (4	Check the t Child tax o			(see instructions): or other dependents
If more	(1) F	irst name Last name			number		to you			reuit		
than four dependents,												
see instructions	s ——			-								
and check here]											<u> </u>
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	ctions) .					. 1a		117,816.
	b	Household employee wages not re	porte	d on Form	n(s) W-2 .					. 1b)	
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	(see i	nstruction	ıs)					. 10	;	
attach Forms	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see ii	nstru	uctions)			. 10		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	orm 2441,	, line 26					. 1e	•	
was withheld.	f	Employer-provided adoption bene			,					. 1f		
lf you did not get a Form	g	Wages from Form 8919, line 6 .								. <u>1</u> g		
W-2, see	h	Other earned income (see instruct	,				· · · ·	···		. <u>1</u> h	<u>ا</u>	0.
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)			1 i			-		117 016
	z 2a	Add lines 1a through 1h Tax-exempt interest	2a		· · · ·	 ьт	axable interest	•••		. 1z . 2b	-	117,816.
Attach Sch. B if required.	2a 3a		2a 3a				Ordinary divider			· 20	-	
	<u> </u>		3a 4a				axable amount			. 30		
Standard	ч а 5а		та 5а				axable amount			 	-	
 Deduction for — Single or 	6a		6a				axable amount			. 6b	-	
Married filing separately,	c	If you elect to use the lump-sum e		method.	check here							
\$13,850	7	Capital gain or (loss). Attach Sche				•	,			7		-309.
 Married filing jointly or 	8	Additional income from Schedule								. 8		-18,659.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	and 8	. This is y	our total inc	come	e			. 9		98,848.
\$27,700	10	Adjustments to income from Sche	dule 1	, line 26						. 10		
Head of household,	11	Subtract line 10 from line 9. This is	your	adjusted	gross incor	ne				. 11		98,848.
\$20,800 • If you checked r	12	Standard deduction or itemized	deduc	tions (fro	m Schedule	A)				. 12	2	13,850.
any box under Standard	13	Qualified business income deduct	on fro	m Form 8	995 or Form	899	5-A			. 13		
Deduction,	14		•••							. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ss, enter	-0 This is y	ourt	taxable incom	е.		. 15	j	84,998.

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

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌	1	16	14,002.
Credits	17	Amount from Schedule 2, lin	e3				1	17	
	18	Add lines 16 and 17					1	18	14,002.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		1	19	
	20	Amount from Schedule 3, lin	ie8				2	20	
	21	Add lines 19 and 20					2	21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			2	22	14,002.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		2	23	0.
	24	Add lines 22 and 23. This is	your total tax				2	24	14,002.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a 18	,348.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c					2	5d	18,348.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	22 return		2	26	
qualifying child,	27	Earned income credit (EIC)			No	27			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ie 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	undable credits	3	32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments			3	33	18,348.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amou	nt you overpaid	3	34	4,346.
	35a	Amount of line 34 you want	refunded to you	I. If Form 8888	is attached, che	ck here	. 🗌 🛛	5a	4,346.
Direct deposit?	b	Routing number 0 3 1				Checking	Savings		
See instructions.	d	Account number 3 6 0	8 9 3 9	9 3 1 !	5				
	36	Amount of line 34 you want a	applied to your	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24							
You Owe		For details on how to pay, g	o to <i>www.ir</i> s.gov	//Payments or	see instructions		🤮	37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party		you want to allow another	•					F	J
Designee		tructions					omplete belo		K No
	De: nar	signee's ne		Phone no.			onal identificat per (PIN)	ion	
Sign		der penalties of perjury, I declare th	nat I have examined		accompanving sche		. ,	est of n	nv knowledge and
-		ief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the IRS	S sent y	ou an Identity
		-							enter it here
Joint return?					SOFTWARE I		(see inst		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat	ion			our spouse an on PIN, enter it here
your records.							(see inst.		
	Ph	one no. (980)621-989	8	Email address	SRTHARSHA2	205@GMAIL.CC	M		
		eparer's name	Preparer's signat	1	211211110111721	Date	PTIN	Cł	neck if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/05/2024	P0208270	з∣г	Self-employed
Preparer		n's name GLOBAL TAX				,,,		-	/8)965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816		Firm's El		84-3171965
Go to www.irs.ad		11040 for instructions and the late			BAA	REV 02/23/24 PRO			Form 1040 (2023)
					DAA				- ()

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 for instructions and the latest information.

OMB No. 1545-0074

2023 Attachment Sequence No. 01 ial security number

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social secu
KRISHNA SRI HARSHA DEVARAKONDA	098-65-1331
Port L. Additional Income	

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta		5	-18,659.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81	-	
m	Olympic and Paralympic medals and USOC prize money (see	_		
	· · · · · · · · · · · · · · · · · · ·	8m	_	
n		8n	-	
0	Section 951A(a) inclusion (see instructions)	80	-	
р		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	80 (
	1040, line 1a or 1d	<u>8s (</u>	4	
t	a nongovernmental section 457 plan	8t		
	Wages earned while incarcerated	8u	-	
u 7	Other income. List type and amount:	ou	-	
Z		8z		
9	Total other income. Add lines 8a through 8z		9	
9 10	Combine lines 1 through 7 and 9. This is your additional income . Enter		9	
	1040, 1040-SR, or 1040-NR, line 8		10	-18,659.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedule	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	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)			
Z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV 02/	/23/24 PRO	Schedule 1 (Form 1040) 2023

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.

2023 Attachment Sequence No. 12

Internal Revenue Service Name(s) shown on return

Department of the Treasury

KRISHNA SRI HARSHA DEVARAKONDA

Your social security number 098-65-1331

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X 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)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss fi Form(s) 8949, Pa line 2, column	rom art I,	(h) Gain or (loss) Subtract column (e) from column (d) and 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 Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	217.	213.			4.
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	usts from	5			
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions						()
7	e any long- 	7	4.			

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

	instructions for how to figure the amounts to enter on the below.	_ (d)(e)		(g) Adjustmen		(h) Gain or (loss) Subtract column (e)
This form may be easier to complete if you round off cents to whole dollars.		Proceeds (sales price)	Cost (or other basis)	to gain or loss from Form(s) 8949, Part II, line 2, column (g)		from column (d) and 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 Box D checked	273.	450.			-177.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked	87.	223.			-136.
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824			. ,	11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	-	14	()		
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•			15	-313.

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 - 309.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 both gains?	
	No. Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. 	
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 (309.)
	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.	
	X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

BAA REV 02/23/24 PRO

Schedule D (Form 1040) 2023

-orm **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.



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

 KRISHNA SRI HARSHA DEVARAKONDA
 098-65-1331

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)

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

1 (a) Description of property		(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.), (h) Gain or (loss) Subtract column (e)		
(Example: 100	sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see <i>Column</i> (e) in the separate instructions.	(f) Code(s) from instructions (g) Amount of adjustment		from column (d) and combine the result with column (g).	
ROBINHOOD CRP	TO LLC	01/01/23	12/31/23	217.	213.			4.	
2 Totals. Add the amongative amounts). Schedule D, line 1b above is checked),	Enter each tota (if Box A above	al here and inc is checked), lir	lude on your 1e 2 (if Box B	217.	213.			4.	

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 2
Name(s) shown on return. Name and SSN or taxoaver identification no, not required if shown on other side	Social security number or taxpayer identification num	ber

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

098-65-1331

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)	instructions. Code(s) from Amou		amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/23	273.	450.			-177.
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), lir	lude on your 1e 9 (if Box E	273.	450.			-177.

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.

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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 KRISHNA SRI HARSHA DEVARAKONDA

Social security number or taxpayer identification number 098-65-1331

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	01/01/00	10/21/02	0.7	202		aujustment	120
ROBINHOOD CRPTO LLC	01/01/22	12/31/23	87.	223.			-136.
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), lir	lude on your 1e 9 (if Box E	87.	223.			-136.

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		-		Supplementa							OMB No	o. 1545-0074
(Form	1040)	(From re		royalties, partnersl					trusts, REMI	Cs, etc.)	20)23
	nent of the Treasury Revenue Service			tach to Form 1040, .gov/ScheduleE for					Attachment Sequence No. 13			
	shown on return		GO 10 WWW.II'S.	.gov/ScheduleE 10	msur			ilest in		Your soci	al security	
		RSHA D									5-1331	
-	RISHNA SRI HARSHA DEVARAKONDA 098-6 Part I Income or Loss From Rental Real Estate and Royalties											
T are	Note: If yo	u are in th	ne business of rent	ting personal proper on page 2, line 40.			c . See	e instruc	ctions. If you a	are an indi [,]	vidual, rep	ort farm
Α	Did you make ar	y payme	nts in 2023 that	would require you	to file	Form(s) 1	099? 5	See ins	structions .		. 🗌 Ye	es 🛛 No
B	f "Yes," did you	or will ye	ou file required F	orm(s) 1099?							. 🗌 Ye	es 🗌 No
1a				eet, city, state, ZIF								
Α	NANDANAVA	JAM CO	LONY HYDERA	BAD TELANGAN	JA TN	J 50009	90					
B												
C												
1b	Type of Prope	Type of Property 2 For each rental real estate property listed Fair Rental Perso										0.11/
	(from list below		above, report t	he number of fair	rental	and			Days	Da	iys	QJV
Α	3			ays. Check the Q			Α		365		0	
В				requirements to f enture. See instru			В					
С			quainou joint t				С					
	of Property:											
	Single Family R			n/Short-Term Ren	tal	5 Land			Self-Rental	、		
2	Multi-Family Re	sidence	4 Comme	rcial		6 Roya	alties	8	Other (desc	ribe)		
									Propert	ies:		
Incom	ne:						Α		В			С
3					3		6	00.				
4	Royalties rece	ved			4							
Exper												
5	•				5							
6			structions)		6		1 4	0.5				
7	•		nce		7		1,4	25.				
8 9					8							
9 10			sional fees		10							
11	0	•			11		1.0	00.				
12	•		to banks, etc. (s		12		-/•					
13	Other interest				13							
14	Repairs				14		4,2	31.				
15					15		3,8	66.				
16	Taxes				16							
17					17		4,8					
18	•	xpense o	or depletion		18		3,8	42.				
19	Other (list)				19							
20			nes 5 through 19		20		19,2	59.				
21				or 4 (royalties). If dout if you must								
	file Form 6198			•	21	-	-18,6	59.				
22	Deductible rer			limitation, if any,			- 1 -					
			tructions)		22	(18,65	59.)	()	(
23a		-		or all rental prope				23a		600.		
b				or all royalty prop				23b				
с				for all properties				23c				
d				for all properties				23d		8,842.		
е				for all properties				23e	19	,259.		
24				on line 21. Do not				• •			1	
25				nd rental real estate							(18,659.
26				ncome or (loss). (on page 2 do no								

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

26

-18,659.

-18,659.