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

PRAMOD KUMAR DARISHETTY Spouse's name SNEHA NAGULA Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter 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
Spouse's name SNEHA NAGULA Part II Tax Return Information — Tax Year Ending December 31, 2023 (Enter 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
Spouse's name SNEHA NAGULA Part II Tax Return Information — Tax Year Ending December 31, 2023 (Enter 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
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter 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
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1 Adjusted gross income
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1
Total tax Total tax Total tax Tederal income tax withheld from Form(s) W-2 and Form(s) 1099 Amount you want refunded to you Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) 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) I am now authorizing, and to the best wy 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 return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (EF 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 reas 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 Financ Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software payment of my federal taxes owed on this return and/or a payment of estimated tax, and financial institution to debit the entry to this account. The 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 payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the processing of the electronic payment in the processing of the electronic payment.
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) I am now authorizing, and to the best 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, and to the best 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 teat return (original or amended) I am now authorizing, I consent to allow my intermediate service provider, transmitter, or electronic return originator (Eft 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 reas 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 Financ Agent to intitiate an ACH electronic funds withdrawal (direct debtje entry to the financial intitition account indicated in the tax preparation software 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. Ti 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 payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received on later than business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment 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
Amount you want refunded to you Amount you want refunded to you Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) 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) I am now authorizing, and to the best 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 teturn (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (EF 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 reas 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 Financ Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software 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. If 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 payment, I must contact the U.S. Treasury Financial Agent at 1-888-335-4537. Payment cancellation requests must be received no later than business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment 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 appli
Amount you want refunded to you 5 Amount you owe 5 Dart 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) I am now authorizing, and to the best 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 return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ER 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 reas 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 Financ Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software 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. To 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 payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment 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, reflectionic Funds Withdrawal Consent. Taxpayer's PIN: check one box only I will enter my PIN
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) I am now authorizing, and to the best return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (EF 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 reas 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 Financ Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software 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. The 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 payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment 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, it leads to the payment 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 author
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) I am now authorizing, and to the best 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 return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ER 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 reas 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 Financ Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software 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. The 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 payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment 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, the ERO firm name signature on the income tax return (original or amended) I am now authorizing. Check this box or if you are entering your own PIN and your
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best 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 treturn (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ER 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 reas 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 Financ Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software 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. The 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 payment, I must contact the U.S. Treasury Financial Agent at 1-888-353. Payment cancellation requests must be received no later than business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment 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, refer five digits, but don't enter all zeros I authorize GLOBAL TAXES LLC ERO firm name signature on the income tax return (original or amended) I am now authorizing. Check this box or if you are entering your own PIN and your return is filed using the Prac
Snouse's PIN: check one hay only
★ I authorize GLOBAL TAXES LLC to enter or generate my PIN 5 2 6 5 8 as m
ERO firm name Enter five digits, but
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 or if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part below.
Spouse's signature ▶ Date ▶
Practitioner PIN Method Returns Only—continue below
Part III Certification and Authentication — Practitioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros
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 no 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 trequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Individual Income Tax Returns.
ERO's signature ▶ Date ▶
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2023

OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jar	n. 1–De	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20		See ser	parate instr	uctions.		
Your first name	and n	niddle initial	Last n	ame					Your so	cial security	/ number		
PRAMOD I	KTTMA	AR	DAR	ISHETTY					807	65 13			
		's first name and middle initial	Last name							Spouse's social security numl			
SNEHA			NAG	III.A					988 95 2658				
	(numb	per and street). If you have a P.O. box, see					Apt. no.			ntial Election			
4949 PRI	INTE	RS WAY					376		Check h	nere if you, o	or your		
		fice. If you have a foreign address, also co	omplete spaces below. State ZIP				ZIP code			if filing joint			
FRISCO			TX 750				75033			this fund. C ow will not o			
Foreign country	y name			Foreign province/state/	coun	ty	Foreign postal	code		or refund.	,		
										You	Spouse		
Filing Status	s [Single				Head of ho	ousehold (HO	——.)Н)					
Check only		Married filing jointly (even if only or	ne had	income)									
one box.		☐ Married filing separately (MFS)				☐ Qualifying	surviving spo	ouse (QSS)				
	lf	you checked the MFS box, enter the	name	of your spouse. If you	u che	ecked the HOH	or QSS box,	, ente	r the chi	ld's name i	if the		
	qı	ualifying person is a child but not you	ır depe	ndent:									
Digital	At a	any time during 2023, did you: (a) rece	eive (as	s a reward award or	navr	ment for prope	rty or service:	s). or	(b) sell				
Assets		hange, or otherwise dispose of a digi	•				•	, .	. ,	Yes	⊠ No		
Standard		meone can claim: You as a de					, (
Deduction		Spouse itemizes on a separate return	•	•		•							
A are /Dilin da a a								0	1050		1		
		u: ☐ Were born before January 2, 1	959	☐ Are blind Spe	ouse		n before Janu	<u> </u>		ls blir			
Dependent	•			(3) Relationshi	ib I.,	(4) Check the box Child tax cre		Credit for other	,				
If more	(1)	First name Last name	Hamber			to you			- Lanc				
Dependents If more than four dependents, see instructions and check here Income								$\frac{\square}{\square}$		<u>_</u>	┪		
	s —							$\frac{\square}{\square}$		<u>_</u>	┪		
	1 —							$\overline{\Box}$			┪		
-	1a	Total amount from Form(s) W-2, bo	ox 1 (s	ee instructions)					. 1a	12	0,258.		
income	b		•	•					1b		0,230.		
Attach Form(s)	c	Tip income not reported on line 1a	•	` '					1c				
attach Forms	d	·	•	orted on Form(s) W-2 (see instructions)									
W-2G and	e	Taxable dependent care benefits for		()					1d 1e				
1099-R if tax was withheld.	f	•	provided adoption benefits from Form 8839, line 29						1f				
If you did not	g	Wages from Form 8919, line 6.							1g				
get a Form	h	Other earned income (see instructi							. 1h		0.		
W-2, see instructions.	i	•	ontaxable combat pay election (see instructions)										
	z	Add lines 1a through 1h							. 1z	12	0,258.		
Attach Sch. B	2a	- I	2a		b T	axable interest			. 2b				
if required.	3a	Qualified dividends	3a		b C	rdinary divider	nds		. 3b				
	4a	IRA distributions	4a		b T	axable amount	t		. 4b				
Standard Deduction for—	5a	Pensions and annuities	5a		b T	axable amount	t		. 5b				
Single or	6a	6a Social security benefits 6a b Taxable a					t		. 6b				
Married filing separately,	С												
\$13,850	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7	_	3,000.		
Married filing jointly or	8	Additional income from Schedule	1, line	10					. 8	-1	8,148.		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8	. This is your total in	com	e			. 9	9	9,110.		
\$27,700	10	Adjustments to income from Schee	dule 1,	line 26					. 10				
Head of household,	11	Subtract line 10 from line 9. This is	your a	adjusted gross inco	me				. 11	9	9,110.		
\$20,800 If you checked	12	Standard deduction or itemized	deduc	tions (from Schedule	A)				. 12	2	7,700.		
any box under Standard	13	Qualified business income deducti	ion fror	m Form 8995 or Form	า 899	5-A			13				
Deduction,	14								. 14		7,700.		
see instructions. 15 Subtract line 14 from line 11. If zero or less enter -0. This is your tayable income								15	1 7	1 410			

Form 1040 (2023	3)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 4972	з 🗌		16	8,131.	
Credits	17	Amount from Schedule 2, lin	17							
	18	Add lines 16 and 17						18	8,131.	
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lin	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	8,131.	
	23	Other taxes, including self-en	mployment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is	your total tax					24	8,131.	
Payments	25	Federal income tax withheld	from:							
-	а	Form(s) W-2				25a 23	1,002			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	21,002.	
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20	022 return			26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)				27				
attach Sch. ElC.	28	Additional child tax credit fror	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, line 15								
	32	• • •								
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	21,002.	
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	. This is the amour	nt you overpaid		34	12,871.	
	35a	Amount of line 34 you want I	refunded to you	ı. If Form 8888	3 is attached, chec	k here	🗆	35a	12,871.	
Direct deposit?	b	Routing number 3 2 1			,, <u> </u>	Checking	Savings	3		
See instructions.	d	Account number 4 2 0	1 8 9 3	1 9 6 0	6					
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24								
You Owe		For details on how to pay, go	_	-				37		
	38	Estimated tax penalty (see in	structions) .			38				
Third Party		you want to allow another	•			_				
Designee							•		⊠ No	
		esignee's me		Phone no.			sonal idei iber (PIN)	ntification		
Sign	Un	der penalties of perjury, I declare th	nat I have examined	d this return and	accompanying sche	dules and statemer	its, and to	the best	of my knowledge and	
Here	be	lief, they are true, correct, and com	plete. Declaration of	of preparer (othe	r than taxpayer) is ba	sed on all informat	ion of wh	ich prepar	er has any knowledge.	
пеге	Yo	ur signature		Date	Your occupation				nt you an Identity	
							1		IN, enter it here	
Joint return? See instructions.		accessor alamaticus. If a laint vatuum li	ath mount sing	Dete	SOFTWARE I			(see inst.)		
Keep a copy for		ouse's signature. If a joint return, b	otn must sign.	Date	Spouse's occupati	on			nt your spouse an ection PIN, enter it here	
your records.				HOME MAKER	1	(se	e inst.)			
	Ph	one no. (510)736-9424	4	Email address	PRAMOD.KDE	V2@GMAIL.C	MC			
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/14/2024	P020	82703	Self-employed	
Preparer	Firm's name GLOBAL TAXES LLC Pr						none no. (678)965-9522			
Use Only	Fir	m's address 245 ROONE	CT E BRU	NSWICK N	J 08816		Fir	m's EIN	84-3171965	
<u> </u>	-/-	4040 ()							- 1010	

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

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

Name	s) shown on Form 1040, 1040-SR, or 1040-NR		Your so	cial s	ecurity number
PRAM	OD KUMAR DARISHETTY & SNEHA NAGULA		807-6	5-13	44
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes			1	
2a	Alimony received		t	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. Att	ach Schedule	εE.	5	-18,148.
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			
	Section 951(a) inclusion (see instructions)	8n			
0	Section 951A(a) inclusion (see instructions)	80			
p		8p			
q r	Taxable distributions from an ABLE account (see instructions) Scholarship and fellowship grants not reported on Form W-2	8q 8r			
	Nontaxable amount of Medicaid waiver payments included on Form	OI			
S	1040, line 1a or 1d	8s (١		
t	Pension or annuity from a nonqualifed deferred compensation plan or	03 (
·	a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
z	Other income. List type and amount:				
_	The modern Lot type and amount	8z			
9	Total other income. Add lines 8a through 8z			9	

10

-18,148.

10

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				
	-	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 adjustments to income . Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	r here and	on 26	
	1 OITH 1070, 1070-011, 01 1070-1111, 11110-10	• •		. 20	

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

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

OMB No. 1545-0074

2023

Attachment Sequence No. **12**

Your social security number

PRA	AMOD KUMAR DARISHETTY & SNEHA NAGULA			807-	-65-	1344
•	ou dispose of any investment(s) in a qualified opportunity is," attach Form 8949 and see its instructions for additional	•	•			
Par	t I Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines	nstructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to	ts from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result			
	e dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colum		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					
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	S corporations,	estates, and tr	usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	-	our Capital Loss	_	6	(109,554.)
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis		· , •	e any long-	7	-109,554.
Par	Long-Term Capital Gains and Losses—Ge	nerally Assets F			(see i	instructions)
See i lines	nstructions for how to figure the amounts to enter on the below.	(d)	(e)	(g) Adjustmen		(h) Gain or (loss) Subtract column (e)
	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, I line 2, colum	Part II,	from column (d) and combine the result with column (g)
	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					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
	Net long-term gain or (loss) from partnerships, S corporat				12	
	- 4 . 3				13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	y, from line 13 of y	-	_	14	()
15	Net long-term capital gain or (loss). Combine lines 8a	a through 14 in co	lumn (h). Then, go	to Part III	15	

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** -109,554. 16 Combine lines 7 and 15 and enter the result 16 • 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 21 3,000.) • (\$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 qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ 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.

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.

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

Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Your social security number

PRAM	MOD KUMAR DARISHETTY & SNEHA NAGULA						807-65	5-1344		
Part										
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use S	Schedule	C. See	instru	ctions. If you a	are an indiv	idual, rep	ort farm	
Α Γ			-orm/o\ 1(2002 6	`aa ia	tw.otiono			- V	Na.
										No No
					• •				:S r	10
1a	Physical address of each property (street, city, state, ZII	P code)								
Α	KORUTLA JAGITYAL TELANGANA IN 505330									
В										
С										
1b	b Type of Property 2 For each rental real estate property listed Fair Rental Personal Use QJ									
	(from list below) above, report the number of fair					Days	Day	ys	QU	v
Α	personal use days. Check the Q			Α		365		0]
В	if you meet the requirements to qualified joint venture. See instru			В]
С	quained joint venture. See institu	uctions.		С						
Туре	of Property:									
1	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Land		7	Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Royal	ties	8	Other (desc	ribe)			
						Propert				
Incon	20.	\vdash		A		Propert B	103.		С	
3	Rents received	3			20.					
4	Royalties received	4			20.					
Exper		+ + +								
5 5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,6	68.					
8	Commissions	8			51.					
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,8	97.					
12	Mortgage interest paid to banks, etc. (see instructions)	12		-						
13	Other interest	13								
14	Repairs	14		5,2	68.					
15	Supplies	15		4,4	26.					
16	Taxes	16								
17	Utilities	17		4,6	58.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		18,6	68.					
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			10 1	4.0					
00	file Form 6198	21		18,1	48.					
22	Deductible rental real estate loss after limitation, if any,		-	0 1 4	١٠ ،	,		,		
00-	on Form 8582 (see instructions)	22 (8,14		(F20			
23a	Total of all amounts reported on line 3 for all rental proper				23a		520.			
b	Total of all amounts reported on line 4 for all royalty prop				23b					
C C	Total of all amounts reported on line 12 for all properties Total of all amounts reported on line 18 for all properties				23c 23d					
d	Total of all amounts reported on line 20 for all properties				23a	1 (3,668.			
e 24	Income. Add positive amounts shown on line 21. Do not		 a anv los		236	Τ.	. 24			
2 4 25	Losses. Add royalty losses from line 21 and rental real estat		-		 nter to	tal losses ha	-	,	18,14	<u> </u>
26	Total rental real estate and royalty income or (loss).								10,1 1	J.
20	here. If Parts II, III, and IV, and line 40 on page 2 do no									
	Schedule 1 (Form 1040), line 5. Otherwise, include this al						. 26		-18,1	48.