Form **9325** (January 2017)

Department of the Treasury - Internal Revenue Service

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

i nank y	ou for participating in IRS <i>e-file</i> . 210-51-7822	
Гахрауе	r name DEBPARNA DAS	
Гахрауе	r address (optional)	
215 1s	T AVE W APT 708	
SEATTL	E, WA 98119	
1. X	Your federal income tax return for 2022	
	Submission Processing Center. The electronic filing	services were provided byGLOBAL TAXES LLC
2. 🗶		ing a Personal Identification Number (PIN) as your electronic ctronic Return Originator (ERO) to enter or generate a PIN is 222496202309007oagul.
3.	Your return was accepted on	Allow 4 to 6 weeks for the processing of your return.
		tion on your return may be reduced or disallowed due to a
4.	Your electronic funds withdrawal payment request v	vas accepted for processing.
5.	Your electronic funds withdrawal payment request varawal section.	vas not accepted for processing. Refer to the "If You Owe
6.	Your Form 4868, Application for Automatic Extension accepted on The Suits	on of Time to File U.S. Individual Income Tax Return, was abmission ID assigned to your extension

DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at *www.irs.gov*, or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to <code>www.irs.gov</code> and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

BAA REV 03/22/23 PRO Form **9325** (Rev. 1-2017)

The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to www.irs.gov/e-pay.

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to www.irs.gov. You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.

Catalog Number 12901K BAA www.irs.gov REV 03/22/23 PRO Form **9325** (Rev. 1-2017)

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

OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space.

Filing Status	X S	Single Married filing jointly	Marr Marr	ied filing separatel	y (MFS)	Head of	hous	ehold (HOF	l)		ifying survi	ving	
Check only one box.	If vo	u checked the MFS box, enter the	name of	vour spouse. If vo	u check	ed the HOH o	r 0.59	Shox ente	r the c	•	ise (QSS) name if the	- gualifying	
ONC BOX.	-	on is a child but not your dependen		your spouse. If yo	u cricci	ca the Horro	QOC	box, crite	1 1110 0	illia 3	name ii tiic	, qualifying	
Your first name	and mi	ddle initial	Last n	ame					Y	our so	cial security	number	
DEBPARNA			DAS						2	210-51-7822			
		first name and middle initial	Last na	ame					_			urity number	
Home address	(numbe	r and street). If you have a P.O. box, s	see instruct	tions.				Apt. no.	Pı	esider	ntial Election	n Campaign	
215 1ST	AVE	W						708			ere if you, o	,	
City, town, or p	ost offic	ce. If you have a foreign address, also	complete	spaces below.	Sta	te	ZIP	code		spouse if filing jointly, want to go to this fund. Checkin			
SEATTLE					WZ	1	98	119			w will not c		
Foreign country	name			Foreign province/sta	ate/count	У	Fore	ign postal co	de yo	our tax	or refund.	Ü	
											You	Spouse	
Digital	At an	ny time during 2022, did you: (a) r	eceive (as	s a reward, award,	or payr	nent for prope	rty o	r services);	or (b)	sell,			
Assets	exch	ange, gift, or otherwise dispose o	of a digital	l asset (or a financ	ial inter	est in a digital	asse	t)? (See ins	structi	ons.)	Yes	⊠ No	
Standard	Som	eone can claim:	depender	nt 🗌 Your spo	ouse as	a dependent							
Deduction		Spouse itemizes on a separate re	turn or yo	u were a dual-stat	us alien								
Age/Blindness	You:	Were born before January 2	1958	Are blind	Spouse	· Was bo	rn be	fore Janua	rv 2 1	958	☐ Is blir	nd	
Dependents			,	(2) Social secu		(3) Relationsh			, ,			nstructions):	
-		rst name Last name		number	unity	to you	"P	Child ta		· 1			
If more than four	- '	East name							7			7	
dependents,									ī			ī	
see instructions and check	· —											<u> </u>	
here]	
Income	1a	Total amount from Form(s) W-2	, box 1 (se	ee instructions)						1a	14	3,590.	
income	b	Household employee wages no	t reported	on Form(s) W-2						1b			
Attach Form(s)	С	Tip income not reported on line	1a (see ir	nstructions)						1c			
W-2 here. Also attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d				
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26							1e				
1099-R if tax was withheld.	f	Employer-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 instru	uctions)	ctions)						1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election	n (see inst	tructions)		<u>1</u> i					4		
	Z	Add lines 1a through 1h .								1z	14	3,590.	
Attach Sch. B	2a	Tax-exempt interest	2a			axable interes				2b		8.	
if required.	3a	Qualified dividends	3a	15.		rdinary divide				3b		15	
	4a	IRA distributions	4a			axable amoun				4b			
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun				5b	+		
Single or	6a	Social security benefits	6a			axable amoun	t.			6b	_		
Married filing separately,	_C	If you elect to use the lump-sum		•	`	,	•		. 📙		4	1.0	
\$12,950	7	Capital gain or (loss). Attach Sci		•	•				. Ш	7	+	18.	
Married filing jointly or	8	Other income from Schedule 1,		This is a second at a left			٠			8		2,500.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b,					٠			9	+ 13	1,131.	
\$25,900	10	Adjustments to income from Sc	-				٠			10	1 2	1 1 2 1	
 Head of household, 	11	Subtract line 10 from line 9. This	•				٠			11		1,131.	
\$19,400	12	Standard deduction or itemize Qualified business income dedu		•	,	 5 A			•	12	+	2,950.	
If you checked any box under	13 14	Add lines 12 and 13					•			13	1	2 OF0	
Standard Deduction,	15	Subtract line 14 from line 11. If :					ne			15		<u>2,950.</u> 8,181.	
see instructions.	10	Capacitine 14 HOIII IIIIC 11. II 2	2010 01 163	55, 611161 -0 11115	io your i	arabie ilicoli				13		0,101.	

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	22,196.
Credits	17	Amount from Schedule 2, lin					[17	
	18	Add lines 16 and 17					[18	22,196.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		[19	
	20	Amount from Schedule 3, lin	ie 8				[20	
	21	Add lines 19 and 20					[21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[22	22,196.
	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	22,196.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				25a 27	,771.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	•					25d	27,771.
	26	2022 estimated tax payment					🗀	26	
If you have a 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	3. line 8		29			
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3, lin	e 15			31			
	32	Add lines 27, 28, 29, and 31				indable credits		32	
	33	Add lines 25d, 26, and 32. T	•	-	-		_	33	27,771.
Defined	34	If line 33 is more than line 24	•					34	5,575.
Refund	35a	Amount of line 34 you want	•				. 🗆 🏗	35a	5,575.
Direct deposit?	b	Routing number 1 1 1			·		Savings		
See instructions.	d	Account number 5 8 1							
	36	Amount of line 34 you want			ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g							
rou owe	38					38		37	
Third Dordy		Estimated tax penalty (see in							
Third Party Designee		you want to allow another	•		rn with the IRS?		mplete bel	OW/	X No
Designee		signee's		Phone			nal identifica		
	nai			no.			er (PIN)		
Sign		der penalties of perjury, I declare tief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the IF	≀S ser	nt you an Identity
							I		N, enter it here
Joint return?				BI ENGINEER			(see ins		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupati	on			nt your spouse an ection PIN, enter it here
your records.							(see ins		I I I I I I I I I I I I I I I I I I I
	Ph	one no. (346)600-215	4	Email address	DAS DERPARNA	.2204@GMAIL.CO	м		
		eparer's name	Preparer's signat		LID DELIMINA	Date Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	04/03/2023	P020827	03	Self-employed
Preparer		m's name GLOBAL TA				, , , , , , , , , , , , , , , , , , , ,			678)965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816		Firm's I		84-3171965
Go to www.irs.a		n1040 for instructions and the late			BAA	REV 03/22/23 PRO	,		Form 1040 (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
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	ame(s) shown on Form 1040, 1040-SR, or 1040-NR					
DEBP	ARNA DAS		210-5	1-78	322	
Par	t I 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. Att			5	-12,500.	
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					
	instructions)	8m				
n	Section 951(a) inclusion (see instructions)	8n				
0	Section 951A(a) inclusion (see instructions)	80				
р	Section 461(I) excess business loss adjustment	8p				
q	Taxable distributions from an ABLE account (see instructions)	8q				
r	Scholarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form	8r				
S	1040, line 1a or 1d	8s (١			
	Pension or annuity from a nonqualifed deferred compensation plan or	05 (,			
t	a nongovernmental section 457 plan	8t				
u	Wages earned while incarcerated	8u				
z	Other income. List type and amount:					
_	enter meeting both type and amount	8z				
9	Total other income. Add lines 8a through 8z			9		

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

-12,500.

10

Schedule 1 (Form 1040) 2022 Page **2**

Educator expenses 11	Par	Adjustments to Income			
officials. Attach Form 2106 1 Health savings account deduction. Attach Form 8889 1 Health savings account deduction. Attach Form 8889 1 Deductible part of self-employment tax. Attach Schedule SE 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed health insurance deduction 1 The Penalty on early withdrawal of savings 1 Ba Alimony paid 1 Ba Pecipient's SSN 1 C Date of original divorce or separation agreement (see instructions): 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA desclustion 2 IFA desclustion 2 IFA desclustion 2 IFA description of future use 2 IFA desclustion 2 IFA description of future use 2 IFA descri	11			11	
officials. Attach Form 2106 1 Health savings account deduction. Attach Form 8889 1 Health savings account deduction. Attach Form 8889 1 Deductible part of self-employment tax. Attach Schedule SE 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed health insurance deduction 1 The Penalty on early withdrawal of savings 1 Ba Alimony paid 1 Ba Pecipient's SSN 1 C Date of original divorce or separation agreement (see instructions): 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA desclustion 2 IFA desclustion 2 IFA desclustion 2 IFA description of future use 2 IFA desclustion 2 IFA description of future use 2 IFA descri	12	Certain business expenses of reservists, performing artists, and fee-ba	asis government		
13 Health savings account deduction. Attach Form 8889		officials. Attach Form 2106		12	
15 Deductible part of self-employment tax. Attach Schedule SE 16 Self-employed SEP, SIMPLE, and qualified plans 17 Self-employed death insurance deduction 17 Penalty on early withdrawal of savings 18 Penalty on early withdrawal of savings 19a Alimony paid 19a Alimony paid 19a Recipient's SSN 19a Becipient's SSN 19a Becipient	13	Health savings account deduction. Attach Form 8889		13	
16 Self-employed SEP, SIMPLE, and qualified plans	14			14	
17 Self-employed health insurance deduction 18 Penalty on early withdrawal of savings 18 18 19 Alimony paid 19 Recipient's SSN 10 Date of original divorce or separation agreement (see instructions): 20 IRA deduction 21 Student loan interest deduction 22 Archer MSA deduction 23 Archer MSA deduction 24 Other adjustments: 25 Jury duty pay (see instructions) 26 Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit 24 Contributions of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m 24 Reforestation amortization and expenses 24 Repayment of supplemental unemployment benefits under the Trade Act of 1974 24 Contributions to section 501(c)(18)(D) pension plans 24 Contributions by certain chaplains to section 403(b) plans 24 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24 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 3 Housing deduction from Form 2555 4 Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) 2 Other adjustments. List type and amount: 25 Total other adjustments. Lost lipse are your adjustments to income. Enter here and on	15			_	
18	16			-	
19a Alimony paid b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 IRA deduction		Self-employed health insurance deduction		$\overline{}$	
b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 1RA deduction	18			-	
c Date of original divorce or separation agreement (see instructions): IRA deduction	19a			19a	
20 Student loan interest deduction 21 22 23 24 22 24 24 24 24	b	Recipient's SSN			
Student loan interest deduction Reserved for future use Archer MSA deduction Other adjustments: Jury duty pay (see instructions) Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m. Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974. Contributions to section 501(c)(18)(D) pension plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 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 Housing deduction from Form 2555 Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Other adjustments. List type and amount: 25 Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	С	Date of original divorce or separation agreement (see instructions):			
22 Archer MSA deduction				-	
Archer MSA deduction Other adjustments: Jury duty pay (see instructions) Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974 Contributions to section 501(c)(18)(D) pension plans Contributions by certain chaplains to section 403(b) plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 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 Jeuseph Housing deduction from Form 2555 Let Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Cother adjustments. List type and amount: Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on				$\overline{}$	
24 Other adjustments: a Jury duty pay (see instructions) b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit				-	
a Jury duty pay (see instructions) b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m				23	
b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24		_		
rental of personal property engaged in for profit		, , , , ,	la		
c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	b				
and USOC prize money reported on line 8m			łb	-	
d Reforestation amortization and expenses	С				
e Repayment of supplemental unemployment benefits under the Trade Act of 1974					
Act of 1974			ła		
f Contributions to section 501(c)(18)(D) pension plans	е		10		
g Contributions by certain chaplains to section 403(b) plans					
h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)				-	
discrimination claims (see instructions)	_		rg		
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	"		lh		
from the IRS for information you provided that helped the IRS detect tax law violations	i	·	***		
tax law violations	٠				
j Housing deduction from Form 2555			4i		
k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	i				
1041)	k		.,		
z Other adjustments. List type and amount:	•••		lk		
Total other adjustments. Add lines 24a through 24z	z				
Total other adjustments. Add lines 24a through 24z	_		łz		
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	25			25	
	26	,			
				26	

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

Capital Gains and Losses

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

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

OMB No. 1545-0074

Attachment Sequence No. 12

	(s) shown on return BPARNA DAS			l	ocial se -51-	ecurity number 7822
Did	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona	_	-	× No		· •
	rt I Short-Term Capital Gains and Losses—Ge				ee ins	tructions)
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustme to gain or los Form(s) 8949 line 2, colur	s from , Part 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					
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 (le	oss) from Forms 4	1684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	through 6 in colu	ımn (h). If you hav	e any long-	7	
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets I	Held More Than	One Year	(see	instructions)
See	instructions for how to figure the amounts to enter on the below.	(d)	(e)	(g) Adjustme	nts	(h) Gain or (loss) Subtract column (e)
This who	form may be easier to complete if you round off cents to le dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss from Form(s) 8949, Part 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	54.	36.			18.
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					
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				12	
13	1 9				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	through 14 in co	olumn (h). Then, go	o to Part III		

18.

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 18. • 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? X 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 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? X 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. 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), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ 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.

Form 8949 (2022) Attachment Sequence No. 12A

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side DEBPARNA DAS

Social security number or taxpayer identification number 210-51-7822

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☐ (E) Long-term transactions	•	. ,	•	•	,		9)	
(F) Long-term transactions								
1 (a) Description of property	(b) Date acquired	(c)	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, it If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e		
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	the separate (f) (g)		from column (d) ar combine the resu with column (g).	
Robinhood Securities LLC	01/01/22	12/31/22	54.	36.			18.	
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	al here and inc is checked), lir	lude on your ne 9 (if Box E	54.	36.			18.	

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.

above is checked), or line 10 (if Box F above is checked) .

36.

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. Department of the Treasury Internal Revenue Service Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return DEBPARNA DAS

Your social security number 210-51-7822

Dovid	Income on Loss Fuero Dental Deal Estate on	- d D							-	
Part	Income or Loss From Rental Real Estate ar Note: If you are in the business of renting personal prope rental income or loss from Form 4835 on page 2, line 40.			C . See	instru	ctions. If you a	ıre an in	ndividual, rep	oort fari	n
	Did you make any payments in 2022 that would require you f "Yes," did you or will you file required Form(s) 1099?									No No
1a	Physical address of each property (street, city, state, ZI									
A	PRAKASH NAGAR, NARASARAOPET ANDHRA PI	RADES	SH IN 5	2260	1					
			211 111 0							
C										
1b	Type of Property (from list below) 2 For each rental real estate property above, report the number of fair				Fa	ir Rental Days		onal Use Days	Q	JV
A	personal use days. Check the Q			Α		365		0		<u> </u>
В	if you meet the requirements to qualified joint venture. See instru			В						
С	quaimed joint venture. See instru	JCHOIR	s.	С						
1	of Property: Single Family Residence 3 Vacation/Short-Term Rer Multi-Family Residence 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (descr				
						Properti	es:			
Incom		_		Α		В			С	
3	Rents received			6	00.					
4	Royalties received	4								
Exper		_								
5	Advertising									
6	Auto and travel (see instructions)			1 -	0.0					
7	Cleaning and maintenance			1,5	00.					
8	Commissions									
9	Insurance	9								
10	Legal and other professional fees			- 1 1	0.0					
11	Management fees	_		1,1	00.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest			2 0	0.0					
14	Repairs			3,2						
15	Supplies	15		2,8	00.					
16	Taxes	16		4 -	0.0					
17	Utilities	17		4,5	00.					
18	Depreciation expense or depletion	18								
19	Other (list)	19		12 1	0.0					
20	Total expenses. Add lines 5 through 19	20		13,1	00.					
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 file Form 6198		_	-12,5	00.					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		12,50		()()
23a	Total of all amounts reported on line 3 for all rental proper	erties			23a		600			
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b					
С	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties				23d					
е	Total of all amounts reported on line 20 for all properties				23e	13	,100			
24	Income. Add positive amounts shown on line 21. Do no	t inclu	ıde any lo	sses			. 24	4		
25	Losses. Add royalty losses from line 21 and rental real esta	ite loss	ses from lir	ne 22. E	nter to	otal losses he	re 2 5	5 (12,5	00.)
26	Total rental real estate and royalty income or (loss). here. If Parts II, III, IV, and line 40 on page 2 do not Schedule 1 (Form 1040) line 5. Otherwise, include this a	apply	to you, a	also er	nter th	nis amount o			_12	500