Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

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

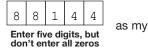
Submission Identification Number (SID)

Taxpayer's name	Social security number						
HARSHNEET SINGH	094-08-8144						
Spouse's name	Spouse's social security number						
PARUL YADAV	008-17-6628						
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	1 309,620.						
2 Total tax	2 55,082.						
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 57,555.						
4 Amount you want refunded to you	4 2,473.						
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 periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

				ERO firm name	, <u> </u>	En
X	l authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	8



2 8

as mv

6

Enter five digits, but don't enter all zeros

7 6

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

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

Your signature

Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC ERO firm name

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

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

Spouse's signature 🕨	Da	te 🕨	•						
	Method Returns Only—continue	belo	w						
Part III Certification and Authentication –	Practitioner PIN Method Only								
ERO's EFIN/PIN. Enter your six-digit EFIN followed by	vyour five-digit self-selected PIN.	2	2		6 (nter all		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 🕨	
	tain This Form — See Instructions rm to the IRS Unless Requested To Do So	
Experience of Bard attack Ast Matter and a state of the		E 9970 (D 01 0001)

Date

to enter or generate my PIN

1040	-	artment of the Treasury—Internal Revenue Servi S. Individual Income Ta x		urn	202	3	OMB No. 1545-	0074	IRS Use Only	∕—Do not w	vrite or sta	ple in this space.
For the year Jan	. 1–Dec	e. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See se	parate i	nstructions.
Your first name	and mi	 iddle initial	Last nar	me						Your so	cial sec	urity number
HARSHNEE	T		SING	н						094		8144
		s first name and middle initial	Last nar									security number
PARUL			YADA	77						008		6628
	(numbe	er and street). If you have a P.O. box, see						Α	pt. no.			ction Campaign
37 GRACE		·····, ,···· ···, ··· · · · · · · · · ·										ou, or your
		ce. If you have a foreign address, also co	mplete sr	oaces bel	ow.	Sta	te	ZIP co	ode	1	,	jointly, want \$3
JERSEY (,,,				NJ		073				nd. Checking a
Foreign country			F	oreian pr	ovince/state/o	-			n postal code	your tax		not change nd.
· · · · · · · · · · · · · · · · · · ·							,			, your ta	Yo	_
Eiling Status		Single					Head of ho	ucoh				·
Filing Status		Married filing jointly (even if only o	ne had ir	ncome)				Jusch				
Check only		Married filing separately (MFS)		icomc)				eurviv	ing spouse	(099)		
one box.	lf v	you checked the MFS box, enter the	name o	f vour sr	ouse If you	ı che			•	. ,	ild'e nai	me if the
		alifying person is a child but not you										
			aopon									
Digital		ny time during 2023, did you: (a) rec						-			_	1
Assets	exch	ange, or otherwise dispose of a dig						t)? (Se	e instructio	ns.)	∐ Ye	es 🛛 No
Standard	Som	eone can claim: You as a de	pendent		Your spouse	e as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-status a	alien						
Age/Blindness	S You:	Were born before January 2, 1	959	Are bli	ind Spo	use	: 🗌 Was borr	n befo	ore January 2	2, 1959	🗌 ls	s blind
Dependents				(2) S	Social security		(3) Relationshi	p (4	•			see instructions):
If more	(1) F	irst name Last name			number		to you		Child tax c	redit	Credit to	r other dependents
than four												
dependents, see instructions	s ——											
and check									<u> </u>			<u> </u>
here											-	
Income	1a	Total amount from Form(s) W-2, b	•		,							328,307.
Attach Form(s)	b	Household employee wages not re	•		.,					. <u>1b</u>		
W-2 here. Also	c	Tip income not reported on line 1a			,					. 10	-	
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	ictions)	• •		. 10		
1099-R if tax	e	Taxable dependent care benefits f		,		•		• •		. 1e		
was withheld.	t	Employer-provided adoption bene						• •		. <u>1f</u>		
lf you did not get a Form	g	Wages from Form 8919, line 6 .		• •		•		· ·		. 1g		
W-2, see	h	Other earned income (see instruct	,	• •		•	· · · ·	···		. 1h	-	0.
instructions.	i	Nontaxable combat pay election (s	see instri	uctions)		•	1 i					200 207
		Add lines 1a through 1h	· · ·	• •	· · · ·			· ·	· · ·	. 1z	-	328,307.
Attach Sch. B if required.	2a	· ·	2a				axable interest		· · ·	. 2b		63.
	<u>3a</u>		3a				ordinary dividen		· · ·		-	1,379.
Standard	4a -		4a				axable amount		· · ·	. 4b	-	
Deduction for—	5a		5a				axable amount			. 5b	-	
 Single or Married filing 	6a	, _	6a				axable amount	• •	 r	. 6b		
separately,	c	If you elect to use the lump-sum e						· ·	l	_		2
\$13,850 Married filing	7	Capital gain or (loss). Attach Scher		•	•			· ·	l		_	0.
jointly or Qualifying	8	Additional income from Schedule						· ·		. 8		-20,129.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-	our total inc	ome	θ	· ·		. 9	_	309,620.
\$27,700 • Head of	10	Adjustments to income from Sche								. 10		
household,	11	Subtract line 10 from line 9. This is	•	-	-					. 11	-	309,620.
\$20,800 • If you checked T	12	Standard deduction or itemized								. 12	-	27,700.
any box under Standard	13	Qualified business income deduct	ion from	Form 89	995 or Form	899	5-A			. 13		136.
Deduction,	14	Add lines 12 and 13				•				. 14		27,836.
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -	0 This is y	our t	taxable incom	е.		. 15		281,784.

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

Form **1040** (2023)

Form 1040 (2023	5)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	54,377.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	54,377.
	19	Child tax credit or credit for	other dependent	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	54,377.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	705.
	24	Add lines 22 and 23. This is	your total tax					24	55,082.
Payments	25	Federal income tax withheld							· · · · · · · · · · · · · · · · · · ·
	а	Form(s) W-2				25a 57	,554.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c	1.		
	d	Add lines 25a through 25c						25d	57 , 555.
If you have a	26	2023 estimated tax payment						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				31			
	32	Add lines 27, 28, 29, and 31.	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T						33	57 , 555.
Refund	34	If line 33 is more than line 24						34	2,473.
norana	35a	Amount of line 34 you want	refunded to you	I. If Form 8888	is attached, che	ck here	. 🗆 İ	35a	2,473.
Direct deposit?	b	Routing number 0 7 1	0 0 0 0	1 3	c Type: 🛛 🗙	Checking	Savings		
See instructions.	d	Account number 5 9 7					Ũ		
	36	Amount of line 34 you want a			ed tax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount vou owe					
You Owe		For details on how to pay, ge						37	
	38	Estimated tax penalty (see ir	nstructions) .			38			
Third Party	Do	you want to allow another				See			
Designee		tructions	•				omplete be	elow.	🗙 No
-		signee's		Phone			onal identifi	cation	
	na			no.			per (PIN)		
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com							
Here		ur signature		Date	Your occupation			• •	nt you an Identity
	10	ur signature		Dale	Four occupation				N, enter it here
Joint return?					SOFTWARE 1	ENGINEER	(see ir	ıst.)	
See instructions.	Sp	ouse's signature. If a joint return, k	ooth must sign.	Date	Spouse's occupat	ion			it your spouse an
Keep a copy for your records.					~~~~~		Identii (see ir		ection PIN, enter it here
,		(445) 400 055			SOFTWARE		,		
		one no. (417) 493-877		Email address	HARSHNEET18	8888@GMAIL.CO			Chaoly if
Paid		parer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		M PRIYA RAM SAGAR GUPTA		a ram sac	GAR GUPTA	04/01/2024	P02082		Self-employed
Use Only		m's name GLOBAL TAX							678)965-9522
			Y CT E BRU	NSWICK N	J 08816		Firm's	; EIN	
Go to www.irs.go	ov/Forn	11040 for instructions and the late	st information.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 23

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
HARSHNEET SING	H & PARUL YADAV	094-08	-8144

Par	t Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	0.
2a		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. Attach Schedule E	5	-20,131.
6	Farm income or (loss). Attach Schedule F.	6	
7	Unemployment compensation	7	
8	Other income:		
а	Net operating loss)	
b	Gambling		
С	Cancellation of debt		
d	Foreign earned income exclusion from Form 2555)	
е	Income from Form 8853		
f	Income from Form 8889		
g	Alaska Permanent Fund dividends		
h	Jury duty pay		
i	Prizes and awards		
j	Activity not engaged in for profit income		
k	Stock options		
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)	_	
n	Section 951(a) inclusion (see instructions)	_	
0	Section 951A(a) inclusion (see instructions)	_	
	Section 461(I) excess business loss adjustment	_	
-	Taxable distributions from an ABLE account (see instructions) 8q	_	
r	Scholarship and fellowship grants not reported on Form W-2 8r	_	
S	Nontaxable amount of Medicaid waiver payments included on Form		
	1040, line 1a or 1d	4	
t	Pension or annuity from a nonqualifed deferred compensation plan or		
	a nongovernmental section 457 plan	- 1	
u	Wages earned while incarcerated 8u	-	
z			
0		_	0
9	Total other income. Add lines 8a through 8z.	9	2.
10	Combine lines 1 through 7 and 9. This is your additional income . Enter here and on Form 1040, 1040, SR, or 1040, NR, line 8	10	-20,129.
or De	1040, 1040-SR, or 1040-NR, line 8		-20, 129

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

Schedule 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 24d		
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:		
05	Tatal athen adjustments. Add lines 04a through 04a	05	
25 06	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	06	
		26	
	BAA REV 03/07/24 PRO	Schedule	1 (Form 1040) 2023

SCHE	DULE	2
(Form	1040)	

Additional Taxes

OMB No. 1545-0074

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

١Ō 2 3 Attock

	Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form1040 for instructions and the latest information.			
Name	Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your so			
HAR	SHNEET SINGH & PARUL YA	DAV	094-08-	8144
Pa	rt I Tax			1
1	Alternative minimum tax. A	Nttach Form 6251	[1	I
2	Excess advance premium	tax credit repayment. Attach Form 8962	2	2
3	Add lines 1 and 2. Enter he	ere and on Form 1040, 1040-SR, or 1040-NR, line 17	′ S	3
Par	rt II Other Taxes			
4	Self-employment tax. Attac	ch Schedule SE................	🖌	۱
5	•	icare tax on unreported tip income. 5		
6		y and Medicare tax on wages. Attach		
7	Total additional social secu	urity and Medicare tax. Add lines 5 and 6	7	7
8	Additional tax on IRAs or c	other tax-favored accounts. Attach Form 5329 if requ	ired.	
	If not required, check here		<u>۱</u>	3
9	Household employment ta	xes. Attach Schedule H	🤤)
10	Repayment of first-time ho	mebuyer credit. Attach Form 5405 if required	1	0
11	Additional Medicare Tax. A	Attach Form 8959	1	1 705.
12	Net investment income tax	x. Attach Form 8960	1	2
13		y and Medicare or RRTA tax on tips or group-ten		3
14		stallment income from the sale of certain residentia		4
15		x on gain from certain installment sales with a sales	•	5
16	Recapture of low-income l	nousing credit. Attach Form 8611	1	6
			(cont	inued on page 2

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

Schedule 2 (Form 1040) 2023

Par	Other Taxes (continued)				
17	Other additional taxes:				
а	Recapture of other credits. List type, form number, and amount:				
		17a			
b	Recapture of federal mortgage subsidy, if you sold your home				
		17b	-		
	Additional tax on HSA distributions. Attach Form 8889	17c	-		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d	_		
е	Additional tax on Archer MSA distributions. Attach Form 8853 .	17e			
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f			
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g			
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h			
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i			
j	Section 72(m)(5) excess benefits tax	17j			
k	Golden parachute payments	17k			
I	Tax on accumulation distribution of trusts	171			
m	Excise tax on insider stock compensation from an expatriated corporation	17m			
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n			
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170			
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p			
q	Any interest from Form 8621, line 24	17q			
z	Any other taxes. List type and amount:				
		17z			
18	Total additional taxes. Add lines 17a through 17z		18		
19	Reserved for future use		19		
20	Section 965 net tax liability installment from Form 965-A	20			
21	Add lines 4, 7 through 16, and 18. These are your total other taxe on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b.		21		5
	BAA			ule 2 (Form 1040) :	5. 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.

Attachment Sequence No. **12**

20

Internal Revenue Service Name(s) shown on return

Department of the Treasury

HARSHNEET SINGH & PARUL YADAV

Your social security number 094-08-8144

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?	Yes	🗙 No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting	y 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) Adjustment to gain or loss Form(s) 8949, f line 2, column	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	1.	1.			0.
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		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	-	6	()		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise		7	0.		

Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (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) Adjustmen to gain or loss Form(s) 8949, I line 2, colum	from Part II,	(h) Gain or (loss) Subtract column (e) 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					
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				
12 13	Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions	12 13				
	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				

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 0.
	• 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 (0.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	
	BAA REV 03/07/24 PRO	Schedule D (Form 1040) 2023

Form **8949**

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service 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 of taxpayer identification number
HARSHNEET SINGH & PARUL YADAV	094-08-8144

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)

(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), (h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.) disposed of (sales price) and see <i>Column</i> (in the separate instructions.			(f) (g) Code(s) from Amount of instructions adjustment		from column (d) and combine the result with column (g).		
Robinhood Securities LLC	01/01/23	12/31/23	1.	1.			0.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your ne 2 (if Box B	1.	1.			0.	

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.

	SCHEDULE E Supplemental Income and Loss					OMB No	o. 1545-0074				
(Form	1040)	(From	rental real estate, royalties, partners	hips, S	corporat	ions, es	tates,	trusts, REMICs,	etc.)	2023	
	ent of the Treasury		Attach to Form 1040					6		Attachn	nent 10
	Revenue Service		Go to www.irs.gov/ScheduleE fo	r instru	uctions an	d the la	test in				ce No. 13
. ,	shown on return	u c D								al security 8-8144	number
Part			ss From Rental Real Estate an	nd Ro	valties			[0.	94-0	0-0144	
rure	Note: If yo	ou are in	the business of renting personal proper	rty, use	e Schedule	c . See	instru	ctions. If you are a	an indi	vidual, rep	ort farm
			ss from Form 4835 on page 2, line 40.								
							• •		• •	re	
1a			each property (street, city, state, Zl		,						
<u> </u>	PRAKASH 1	NAGAR	NARASARAOPET ANDHRA PRA	ADESI	H IN 52	22601					
B											
<u>C</u>							_				
1b	Type of Prope (from list below		For each rental real estate prope above, report the number of fair				⊢a	ir Rental P Days		nal Use iys	QJV
Α	3		personal use days. Check the Q			Α		365	00	0	
B			if you meet the requirements to			B				0	
С			qualified joint venture. See instru	uctions	3.	C					
Туре	of Property:							I			
1	Single Family R	esidenc	e 3 Vacation/Short-Term Ren	ntal	5 Land	1		Self-Rental			
2	Multi-Family Re	sidence	e 4 Commercial		6 Roya	alties	8	Other (describe	e)		
								Properties:			
Incom	ne:					Α		. В			С
3	Rents received	t		3		6	75.				
4	Royalties rece	ived.		4							
Exper	ises:										
5	-			5							
6		-	structions)	6							
7	•		ance	7		1,8	25.				
8				8							
9 10				9 10							
11	-		ssional fees	11		1,6	0.0				
12			to banks, etc. (see instructions)	12		1, 0	00.				
13	00			13							
14				14		4,6	65.				
15	a			15		4,2	74.				
16	Taxes			16							
17				17		4,9					
18		expense	or depletion	18		3,4	55.				
19	Other (list)			19		00.0	0.0				
20			ines 5 through 19	20		20,8	06.				
21			line 3 (rents) and/or 4 (royalties). If nstructions to find out if you must								
	file Form 6198	-		21		-20,1	31.				
22	Deductible rer	ntal real	estate loss after limitation, if any,								
			structions)	22	(20,13	1.)	()	(
23 a	Total of all am	ounts re	ported on line 3 for all rental prope				23a		75.		
b			ported on line 4 for all royalty prop				23b				
С			ported on line 12 for all properties				23c				
d			ported on line 18 for all properties				23d	3,4			
e							1				
24 25					-				24	(20 121
25 26			ses from line 21 and rental real estat						25		20,131.
26			te and royalty income or (loss). d IV, and line 40 on page 2 do no								
			0), line 5. Otherwise, include this a						26		-20,131.

-20,131.

Form 8995

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294 20 Attachment

Sequence No. 55

Name(s) shown on return

HARSHNEET SINGH & PARUL YADAV

Your taxpayer identification number

094-08-8144

Note. You can claim the qualified business income deduction only if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)		
i					
ii					
iii					
iv					
v					
2	Total qualified business income or (loss). Combine lines 1i through 1v,				
•	column (c)	2			
3	Qualified business net (loss) carryforward from the prior year	3 () 4	-		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	-		
5	Qualified business income component. Multiply line 4 by 20% (0.20)	\cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot	5		
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6 679.			
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 ()			
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8 679.			
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	136.	
10	Qualified business income deduction before the income limitation. Add lines 5 an	d9	10	136.	
11	Taxable income before qualified business income deduction (see instructions)	11 281,920.			
12	Enter your net capital gain, if any, increased by any qualified dividends				
	(see instructions)	12 566.			
13	Subtract line 12 from line 11. If zero or less, enter -0	13 281,354.			
14	Income limitation. Multiply line 13 by 20% (0.20)		14	56,271.	
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also the applicable line of your return (see instructions)		15	136.	
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than	n zero, enter -0	16	(0.)	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a				
	zero, enter -0		17	(0.) Form 8995 (2023)	
⊢or Pri	vacy Act and Paperwork Reduction Act Notice, see instructions. REV 03/	07/24 PRO		Form 0990 (2023)	

Form	8959

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions. Attach to Form 1040, 1040-SR, 1040-NR, or 1040-SS.

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

Your social security number 094 - 08 - 8144

HARS	SHNEET SINGH & PARUL YADAV		094-0	8-81	44
Par	Additional Medicare Tax on Medicare Wages				
1	Medicare wages and tips from Form W-2, box 5. If you have more than one				
	Form W-2, enter the total of the amounts from box 5	1	328,307.		
2	Unreported tips from Form 4137, line 6	2			
3	Wages from Form 8919, line 6	3			
4	Add lines 1 through 3	4	328,307.		
5	Enter the following amount for your filing status:				
	Married filing jointly				
	Married filing separately				
	Single, Head of household, or Qualifying surviving spouse \$200,000	5	250,000.		
6	Subtract line 5 from line 4. If zero or less, enter -0			6	78,307.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009).	Enter	here and go to		
	Part II			7	705.
Part	II Additional Medicare Tax on Self-Employment Income				
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you				
	had a loss, enter -0	8			
9	Enter the following amount for your filing status:				
	Married filing jointly.				
	Married filing separately				
	Single, Head of household, or Qualifying surviving spouse \$200,000	9			
10	Enter the amount from line 4	10			
11	Subtract line 10 from line 9. If zero or less, enter -0	11			
12	Subtract line 11 from line 8. If zero or less, enter -0			12	
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (
	go to Part III			13	
Part	Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Coi	npensation		
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14				
	(see instructions)	14			
15	Enter the following amount for your filing status:				
	Married filing jointly				
	Married filing separately				
	Single, Head of household, or Qualifying surviving spouse \$200,000	15			
16	Subtract line 15 from line 14. If zero or less, enter -0-			16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply lin	ne 16	by 0.9% (0.009).		
	Enter here and go to Part IV			17	
Part	V Total Additional Medicare Tax				
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040),	line 11	(Form 1040-SS		
	filers, see instructions), and go to Part V			18	705.
Part	V Withholding Reconciliation				
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form				
	W-2, enter the total of the amounts from box 6	19	4,761.		
20	Enter the amount from line 1	20	328,307.		
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax				
	withholding on Medicare wages	21	4,760.		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Add	ditiona	al Medicare Tax		
	withholding on Medicare wages			22	1.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensatio	n fron	n Form W-2, box		
	14 (see instructions)	,	23		
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also incl	lude t	his amount with		
	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c				
	see instructions)		<u></u>	24	1.
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA		REV 03/07/24 PRO		Form 8959 (2023)

Form 8960	
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Department of the Treasury Internal Revenue Service

Net Investment Income Tax— Individuals, Estates, and Trusts Attach to your tax return.

OMB No. 1545-2227

2023

Attachment Sequence No. 72

Go to www.irs.gov/Form8960 for instructions and the latest information.

Name(s)	HARSHNEET SINGH & PARUL YADAV 094					social security number or EIN		
HARS						3144		
Part	I Investment Income Section 6013(g) election (see instructions)							
	Section 6013(h) election (see instructions)							
	Regulations section 1.1411-10(g) election (see in Regulations section 1.1411-10(g) election (see in Regulation (see in Regulatio	nstructio	ns)					
1	Taxable interest (see instructions)				1	63.		
2	Ordinary dividends (see instructions)				2	1,379.		
3	Annuities (see instructions)				3			
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or							
	businesses, etc. (see instructions)	4a	-20,	131.				
b	Adjustment for net income or loss derived in the ordinary course of a non-							
	section 1411 trade or business (see instructions)	4b						
С	Combine lines 4a and 4b				4c	-20,131.		
5a	Net gain or loss from disposition of property (see instructions)	5a		0.				
b	Net gain or loss from disposition of property that is not subject to net							
	investment income tax (see instructions)	5b						
С	Adjustment from disposition of partnership interest or S corporation stock (see							
	instructions)	5c						
d	Combine lines 5a through 5c				5d	0.		
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)				6			
7	Other modifications to investment income (see instructions)				7			
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7.				8	-18,689.		
Part	•		S					
9a	Investment interest expenses (see instructions)	9a						
b	State, local, and foreign income tax (see instructions)	9b						
c	Miscellaneous investment expenses (see instructions)	9c						
d	Add lines 9a, 9b, and 9c				9d			
10	Additional modifications (see instructions)				10			
11	Total deductions and modifications. Add lines 9d and 10				11			
Part								
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals,				10	0		
	Estates and trusts, complete lines 18a–21. If zero or less, enter -0 Individuals:	• •		•••	12	0.		
40			200	c 0 0				
13	Modified adjusted gross income (see instructions)	13	309,					
14 15	Threshold based on filing status (see instructions)	14 15	250,	620.				
	Enter the smaller of line 12 or line 15				16	0		
16	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). En				16	0.		
17	on your tax return (see instructions)		e and inc	luae	17	0.		
	Estates and Trusts:	• •		•••	17	0.		
18a	Net investment income (line 12 above)	18a						
	Deductions for distributions of net investment income and charitable	104						
b	deductions (see instructions)	18b						
•	Undistributed net investment income. Subtract line 18b from line 18a (see	100						
С	instructions). If zero or less, enter -0	18c						
19a	Adjusted gross income (see instructions)	19a						
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b						
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c						
20	Enter the smaller of line 18c or line 19c				20			
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.							
	include on your tax return (see instructions)				21			
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA	REV 03	3/07/24 PRO			Form 8960 (2023)		