# E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



<b>1040</b>		artment of the Treasury-Internal Revenue Servi		urn	20 <b>2</b>	3	OMB No. 1545	-0074	IRS Use	e Only-	-Do not w	rite or sta	aple in this space.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	oarate i	instructions.
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	urity number
GAURAV			MIRD	HA							764	29	2367
	pouse's	s first name and middle initial	Last na										security numbe
KOMAL			BENI	WAL							764	29	3742
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				A	Apt. no.				ection Campaigi
4417 E :	SAIN	T JOHN									Check h	nere if y	ou, or your
		ice. If you have a foreign address, also co	mplete s	paces belo	w.	Sta	te	ZIP c	ode			<b>.</b>	jointly, want \$3
PHOENIX						AZ	7	850	32		•		nd. Checking a not change
Foreign countr	y name		F	Foreign pro	vince/state/	count	ty	Foreig	gn postal o		your tax		ınd.
Filing Status	<u> </u>	Single					Head of h	ouseh	old (HOI	H)			
-	_	Married filing jointly (even if only o	ne had i	ncome)				000011	0.0 (1.10)	' ',			
Check only one box.	Ē	Married filing separately (MFS)		,			☐ Qualifying	surviv	ina spo	use (C	OSS)		
OHE BOX.	If v	you checked the MFS box, enter the	name c	of your spo	ouse. If vol	ı che	, ,		0 1	,	,	ld's na	me if the
		ualifying person is a child but not you							,				
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward,	award, or	payr	ment for prope	rty or	services	s); or (l	b) sell,		
Assets	exch	nange, or otherwise dispose of a dig	ital asse	t (or a fina	ancial inter	est ir	n a digital asse	et)? (Se	ee instru	ctions	s.)		es 🗵 No
Standard	Som	neone can claim:	pendent	t 🗌 Y	our spous	e as	a dependent						
<b>Deduction</b>		Spouse itemizes on a separate retur	n or you	ı were a d	ual-status	alien							
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blin	nd <b>Spc</b>	ouse	: Was bor	n befo	ore Janu	ary 2,	1959		s blind
Dependent	s (see	instructions):		(2) Sc	cial security	,	(3) Relationsh	in (4	l) Check t	the bo	x if quali	fies for (	(see instructions)
If more		irst name Last name			number		to you		Child	tax cre	edit	Credit fo	or other dependents
than four	MA	IRA MIRDHA		744-	61-873	2	Daughter			X			
dependents,	VEI			+	43-890		Son			×			
see instruction and check	s —												
here													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructi	ons) .						1a		192,821.
Attach Form(s)	b	Household employee wages not re	eported	on Form(s	s) W-2 .						1b		
W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions	)						1c		
attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s)	W-2 (see ii	nstru	ictions)				1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom For	m 2441, li	ine 26						1e		
was withheld.	f	Employer-provided adoption bene	fits from	n Form 88	39, line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .									1g		
get a Form W-2, see	h	Other earned income (see instruct	ions) .					· ·			1h		0.
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)			<u>1</u> i						
	z	Add lines 1a through 1h									1z		192,821.
Attach Sch. B	2a	Tax-exempt interest	2a				axable interest				2b		
if required.	3a_	Qualified dividends	3a	1,(	051.		rdinary divide				3b		1,059.
Standard	4a		4a				axable amoun				4b		
Deduction for—	5a	Pensions and annuities	5a			b T	axable amoun	t			5b		
Single or	6a	,	6a				axable amoun	t		· <u>·</u>	6b		
Married filing separately,	С	If you elect to use the lump-sum e		•		`	,						
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche								. L	7		-3,000.
jointly or	8	Additional income from Schedule	•								8		-18 <b>,</b> 555.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-	ur <b>total inc</b>	ome	e				9		172,325.
\$27,700 • Head of	10	Adjustments to income from Sche									10		
household,	11	Subtract line 10 from line 9. This is									11		172,325.
\$20,800 If you checked	12	Standard deduction or itemized									12		27,700.
any box under Standard	13	Qualified business income deducti	ion from	Form 899	95 or Form	899	5-A				13		1.
Deduction,	14										14		27,701.
see instructions.	15	Subtract line 1/1 from line 11. If zer	n or les	c ontor C	Thic ic v	Our 1	tavabla incom				15	1	111 621

Form 1040 (2023	3)								Page Z	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	22,359.	
Credits	17	Amount from Schedule 2, lin	ie 3					17		
	18	Add lines 16 and 17						18	22,359.	
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	4,000.	
	20	Amount from Schedule 3, lin	ie 8					20		
	21	Add lines 19 and 20						21	4,000.	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	18,359.	
	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 <b>total tax</b>					24	18,359.	
<b>Payments</b>	25	Federal income tax withheld	from:							
_	а	Form(s) W-2				<b>25a</b> 31	L <b>,</b> 354			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	31,354.	
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	)22 return			26		
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27				
allacii Scii. ElC.	28	Additional child tax credit from	n Schedule 8812			28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	ie 15			31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	31,354.	
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amour	nt you <b>overpaid</b>		34	12,995.	
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	k here	🗌	35a	12,995.	
Direct deposit?	b	Routing number 1 2 2		<del></del>	<b>c</b> Type:	Checking	Savings	;		
See instructions.	d	Account number 5 2 0	9 5 7 3	9 5						
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g	37							
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party	Do	you want to allow another				See				
Designee		•	•				omplete	below.	<b>⋈</b> No	
_		signee's		Phone			onal ider	tification		
		me		no.			ber (PIN)			
Sign		der penalties of perjury, I declare the lief, they are true, correct, and com								
Here		ur signature		Date	Your occupation				nt you an Identity	
	10	ur signature		Date	Tour occupation				PIN, enter it here	
Joint return?					PROJECT MA	NAGER	(se	e inst.)		
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupati			nt your spouse an		
Keep a copy for your records.						113 CED		ntity Prote e inst.)	ection PIN, enter it here	
,					PROJECT MA			0 11131.)		
		one no. (602) 814-754		Email address	GAURAV.MIRI				Chapk if:	
Paid		eparer's name	Preparer's signat						Check if:	
Preparer		M PRIYA RAM SAGAR GUPTA		A RAM SAG	SAK GUPTA	04/05/2024		32703	Self-employed	
Use Only		m's name GLOBAL TA			- 00016			Phone no. (678) 965-9522		
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK No	J 08816		Fir	m's EIN	84-3171965	

## 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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

GAURAV MIRDHA & KOMAL BENIWAL

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

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

	Sequence No. <b>01</b>
Your soc	ial security number
764-29	-2367

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. Atta	ich Schedule E .	5	-18,808.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	<b>8a</b> ( )		
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		
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 p8		
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	8s ( )		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
	Substitute Payment from 1099-Misc 253.	<b>8z</b> 253.		
9	Total other income. Add lines 8a through 8z		9	253.
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-18 <b>,</b> 555.

Page **2** Schedule 1 (Form 1040) 2023

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-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)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d		_	
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e		_	
f	Contributions to section 501(c)(18)(D) pension plans	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 tax law violations	04:			
		24i		-	
j	Housing deduction from Form 2555	24j		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	041-			
_	1041)	24k			
Z	Other adjustments. List type and amount:	24z			
25				25	
25 26	Total other adjustments. Add lines 24a through 24z			25	_
20	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> Form 1040, 1040-SR, or 1040-NR, line 10	. ⊏nter	nere and on	26	
					le 1 (Form 1040) 2023
	BAA	KEV 03/0	07/24 PRO	JUNEUU	ie i (Fulli 1040) 2023

#### SCHEDULE D (Form 1040)

Department of the Treasury

## **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** 

Internal Revenue Service Name(s) shown on return Your social security number 764-29-2367 GAURAV MIRDHA & KOMAL BENIWAL Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (g) line 2. column (a) 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 . . . . . . . . . . . . . . 215,953. 203,993. 240. 12,200. Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . 188,777. 175,686. 13,091. 3 Totals for all transactions reported on Form(s) 8949 with Box C checked . . . . . . . . . . . . . . . . . . Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 26,217.) 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . . . . . . 7 -926. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (or other basis) Form(s) 8949, Part II, (sales price) combine the result whole dollars. line 2. column (a) 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 . . . . . . . . . . . . . . 240,230. 215,821. 43. -24,366.

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

1.

109,059.)

-133,424.

11

12

13

14

15

Schedule D (Form 1040) 2023 Page 2

## Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 **-134,350.** • 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 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. 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 gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X 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**

## **Sales and Other Dispositions of Capital Assets**

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

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

2023
Attachment
Sequence No. 12A

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

Social security number or taxpayer identification number

GAURAV MIRDHA & KOMAL BENIWAL

764-29-2367

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.

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

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

☐ (C)	Short-term transactions	not reported	to you on F	orm 1099-B				
1	(a) Description of property	(b) (c) Date sold of	Date sold or	(sales price)	(e) Cost or other basis See the <b>Note</b> below	Adjustment, i 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.)		and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHO	OOD SECURITIES LLC	01/01/23	12/31/23	215,953.	203,993.	W	240.	12,200.
negativ Schedu	. Add the amounts in columns re amounts). Enter each total ule D, line 1b (if Box A if Box I	al here and inc e is checked), <b>lir</b>	lude on your ne 2 (if Box B	215 953	203 993		240	12 200

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

Form 8949 (2023) Attachment Sequence No. 12A Page 2

Social security number or taxpayer identification number 764-29-2367

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.

1 (a) Description of property	(b)	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	Date acquired (Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/23	12/31/23	215,821.	240,230.	W	43.	-24,366.

**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) . . .

-24,366.

215,821.

240,230.

## 8949

## **Sales and Other Dispositions of Capital Assets**

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074 Attachment

Sequence No. 12A

Internal Revenue Service Name(s) shown on return

Department of the Treasury

GAURAV MIRDHA & KOMAL BENIWAL

Social security number or taxpayer identification number

764-29-2367

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)

-	-			reported on not reported		-	sis <b>wasn't</b> report	ed to the IF	RS	
1	(a)  Description of property (Example: 100 sh. XYZ Co.)		(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	Adjustment, it If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)		
							disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions
ROBIN	HOOD	CRYPTO	LLC	01/01/23	12/31/23	188,777.	175,686.			13,091.
nega Sche	tive amo	ounts). Enter ine 1b (if Bo	r each tota ox <b>A</b> above	s (d), (e), (g), and all here and ince is checked), <b>lir C</b> above is checked	lude on your ne 2 (if Box B	188,777.	175,686.			13,091.

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** (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.

Your social security number

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. 13

OMB No. 1545-0074

GAUF	RAV MIRDHA & F	KOMA	L BENIWAL						764-	29-2367			
Part	Income or Note: If you ar rental income	Loss re in th or los	From Rental Real Estate and business of renting personal propers from Form 4835 on page 2, line 40.	nd Ro	yalties Schedule	<b>C</b> . See	instru	ctions. If you are	e an inc	dividual, rep	ort farm		
			nts in 2023 that would require you										
ВІ	f "Yes," did you or	will yo	ou file required Form(s) 1099? .							. 🗌 Ye	s 🗌 No		
1a	Physical address	of ea	ach property (street, city, state, Zll	P code	e)								
Α	A-507, VIDHUT	. NA	GAR, AJMERRD JAIPUR RAJA	ASTH	AN IN 3	302021	1						
В													
С													
1b	Type of Property (from list below)	2	For each rental real estate proper above, report the number of fair	rental	and		Fa	nir Rental Days		onal Use Pays	LJ.IV		
Α	3		personal use days. Check the Q			Α		365		0			
В			if you meet the requirements to a qualified joint venture. See instru			В							
С			quamou joint vontaro. Ooo more	20110110	J.	С							
1	of Property: Single Family Reside Multi-Family Reside		3 Vacation/Short-Term Ren 4 Commercial	ntal	5 Land 6 Roya			Self-Rental Other (describ					
								Propertie	s:				
Incon						Α		В			С		
3				3		- 6	28.						
4		1		4									
Exper 5				5									
6			tructions)	6									
7			nce	7		2,5	69						
8				8		2,5	0.5.						
9				9									
10			sional fees	10									
11				11		2,7	85						
12			to banks, etc. (see instructions)	12		2, 1	00.						
13		•		13									
14				14		3,8	96.						
15				15		3,2							
16				16									
17	Utilities			17		2,8	96.						
18	Depreciation expe	ense d	or depletion	18		4,0	78.						
19				19									
20	Total expenses. A	dd Iir	es 5 through 19	20		19,4	36.						
21	result is a (loss), s	ee in:	ne 3 (rents) and/or 4 (royalties). If structions to find out if you must	21		-18,8	08.						
22			state loss after limitation, if any, ructions)	22	(	18 <b>,</b> 80	8.)	(		)(	)		
23a	Total of all amoun	ts rep	oorted on line 3 for all rental prope	erties			23a		628.				
b			oorted on line 4 for all royalty prop				23b						
С	Total of all amoun	ts rep	ported on line 12 for all properties				23c						
d	Total of all amoun	ts rep	orted on line 18 for all properties				23d		078.	_			
е		-	orted on line 20 for all properties				23e	19,	436.				
24	•		mounts shown on line 21. <b>Do no</b>		•				24				
25	•	•	ses from line 21 and rental real estat						25	(	18 <b>,</b> 808.)		
26			e and royalty income or (loss).										
			IV, and line 40 on page 2 do no ), line 5. Otherwise, include this a						26		-18 <b>,</b> 808.		

### SCHEDULE 8812 (Form 1040)

# Credits for Qualifying Children and Other Dependents

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

2023

OMB No. 1545-0074

Attachment Sequence No. **47** 

Your social security number

Department of the Treasury Internal Revenue Service Name(s) shown on return Go to www.irs.gov/Schedule8812 for instructions and the latest information.

764-29-2367 GAURAV MIRDHA & KOMAL BENIWAL Child Tax Credit and Credit for Other Dependents 1 Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR . 1 172,325 Enter income from Puerto Rico that you excluded . . . . . . 2a Enter the amounts from lines 45 and 50 of your Form 2555 . . . b 2b 0. c Enter the amount from line 15 of your Form 4563 . . . . 2c Add lines 2a through 2c . . . . . . . . . . . . . . . . . 2d3 3 325. 4 Number of qualifying children under age 17 with the required social security number 2 5 4,000. 5 Number of other dependents, including any qualifying children who are not under age 6 17 or who do not have the required social security number . . . . . . . . . . . . Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4. 7 7 8 Add lines 5 and 7 . . . . . . . . . . . . 8 4,000. Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 9 400,000. 10 Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 10 0. 11 11 0. Is the amount on line 8 more than the amount on line 11? . . . 12 4,000. No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27. **Yes.** Subtract line 11 from line 8. Enter the result. 13 Enter the amount from Credit Limit Worksheet A 13 22,359. Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents 4,000. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19. If the amount on line 12 is more than the amount on line 14, you may be able to take the additional child tax credit on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

BAA

Schedule 8812 (Form 1040) 2023

Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line	e 27 .	
16a	Subtract line 14 from line 12. If zero, stop here; you cannot take the additional child tax credit. Skip Parts II-A		
	and II-B. Enter -0- on line 27	16a	0.
b	Number of qualifying children under 17 with the required social security number: x \$1,600.		
	Enter the result. If zero, <b>stop here</b> ; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	
	<b>TIP:</b> The number of children you use for this line is the same as the number of children you used for line 4.		
17	Enter the <b>smaller</b> of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\dots \dots \dots \dots \dots \dots \dots \dots \dots$	20	
	Next. On line 16b, is the amount \$4,800 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
	Otherwise, go to line 21.	( )	
	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	S Of P	uerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or		
	if you are a bona fide resident of Puerto Rico, see instructions	-	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form		
22	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22	-	
23	Add lines 21 and 22	-	
24	1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27,		
	and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	
25 26	Enter the <b>larger</b> of line 20 or line 25	26	
20	Next, enter the smaller of line 26 on line 27.	20	
Part	II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	
	This is your manifolds client that create. Effect this unfount on Point 1979, 1979-1979, or 1979-1979, fille 20.	-/	

## Form **8995**

Department of the Treasury

Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

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

OMB No. 1545-2294

2023

Attachment Sequence No. **55** 

Name(s) shown on return

GAURAV MIRDHA & KOMAL BENIWAL

Your taxpayer identification number 764-29-2367

**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		Qualified business ncome or (loss)
i				
ii				
iii				
iv				
v				
2 3 4 5	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2 3 ( 4	5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	<b>6</b> 7.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (		
8 9	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	8 7.	9	1.
10	Qualified business income deduction before the income limitation. Add lines 5 an		10	1.
11	Taxable income before qualified business income deduction (see instructions)	<b>11</b> 144,625.		
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	<b>12</b> 1,051.		
13	Subtract line 12 from line 11. If zero or less, enter -0	<b>13</b> 143,574.		
14	Income limitation. Multiply line 13 by 20% (0.20) $\cdot$		14	28,715.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also		45	4
16	the applicable line of your return (see instructions)		15 16 (	1.
16 17	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a		16 (	0. )
	zero, enter -0		17 (	0.

(Rev. November 2023)

Department of the Treasury Internal Revenue Service

Taxpayer name(s) shown on return

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and
Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074 For tax year 20 23 Attachment

Sequence No. 70

Taxpayer identification number

GAUI	RAV MIRDHA & KOMAL BENIWAL	764-29-236	7		
repare	's name	Preparer tax identifica	ation numl	oer	
SYAN	1 PRIYA RAM SAGAR GUPTA	P02082703			
Part	Due Diligence Requirements				
	check the appropriate box for the credit(s) and/or HOH filing status claimed on the retubenefit(s) claimed (check all that apply).		the rel		arts I–V HOH
1	Did you complete the return based on information for the applicable tax year provided by	by the taxpayer	Yes	No	N/A
	or reasonably obtained by you?		×		
2	If credits are claimed on the return, did you complete the applicable EIC and/or C worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Sched 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions worksheet(s) that provides the same information, and all related forms and schedules claimed?	ule 8812 (Form s, or your own	X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you nathe following.	nust do both of			
	<ul> <li>Interview the taxpayer, ask questions, and contemporaneously document the taxpayer determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.</li> </ul>	's responses to			
	• Review information to determine that the taxpayer is eligible to claim the credit(s) an status and to figure the amount(s) of any credit(s)		X		
4	Did any information provided by the taxpayer or a third party for use in preparing information reasonably known to you, appear to be incorrect, incomplete, or inconsis answer questions 4a and 4b. If " <b>No</b> ," go to question 5.)	tent? (If " <b>Yes</b> ,"		×	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent inf	ormation?			
b	Did you contemporaneously document your inquiries? (Documentation should include you asked, whom you asked, when you asked, the information that was provided, and information had on your preparation of the return.)	the questions the impact the			
5	Did you satisfy the record retention requirement? To meet the record retention requirer keep a copy of your documentation referenced in question 4b, a copy of this Form 8867 applicable worksheet(s), a record of how, when, and from whom the information used to 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) processed to the applicable on to determine eligibility for the credit(s) and/or HOH filing states are constant.	, a copy of any prepare Form provided by the tus or to figure			
	the amount(s) of the credit(s)		X		
	List those documents provided by the taxpayer, if any, that you relied on:				
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return is selected for audit?	eturn if his/her	×		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous	year?	×		
	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)				
а	Did you complete the required recertification Form 8862?				
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a correct Schedule C (Form 1040)?			П	

orm 88	867 (Rev. 11-2023)			Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	Yes	No	N/A
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?			
Part	Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not or ODC, go to Part IV.)	claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	×		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?	×		
Part			 Part \	/\
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qui	alified	Yes	No
D	tuition and related expenses for the claimed AOTC?			
Part	· · · · · · · · · · · · · · · · · · ·			
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax and provided more than half of the cost of keeping up a home for the year for a qualifying person?	x year	Yes	No
Part	VI Eligibility Certification			
	You will have complied with all due diligence requirements for claiming the applicable credit(s) and on the return of the taxpayer identified above if you:	or HO	H filing	status
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's respo in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit( status and to figure the amount(s) of the credit(s);	nses on s) and/c	the ret or HOH	urn or filing
	<ul> <li>B. Complete this Form 8867 truthfully and accurately and complete the actions described in this check credit(s) claimed and HOH filing status, if claimed;</li> </ul>	list for a	ny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 Document Retention.	67 instr	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	<ol><li>Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).</li></ol>	's eligib	ility for	the
	<ol><li>A record of how, when, and from whom the information used to prepare this form and the applica obtained.</li></ol>	ble worl	ksheet(	s) was
	<ol><li>A record of any additional information you relied upon, including questions you asked and the tax determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount</li></ol>	payer's ınt(s) of	respon the cre	ses, to dit(s).
	If you have not complied with all due diligence requirements, you may have to pay a penalty for each related to a claim of an applicable credit or HOH filing status (see instructions for more information	:h failur ).	e to co	mply
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct complete?	t, and	Yes	No
	complete?	· · · Form <b>88</b> 0		11-2023