Form 8879
(Rev. January 2021)
Department of the Treesury

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

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

Submission Identification Number (SID)

Taxpayer's name

Taxpay	er's name	Social secul	rity numb	ber
SWA	STHIK SALIGRAMA D JAIN	699-76	5-0298	8
Spouse	's name	Spouse's so	cial secu	urity number
Par	Tax Return Information – Tax Year Ending December 31, 2023 (Enternation	er year you	are au	thorizina)
	whole dollars only on lines 1 through 5.	or your your		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1	81,288.
2	Total tax		2	10,141.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	10,343.
4	Amount you want refunded to you		4	202.
5	_Amount you owe		5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	l authorize	GLOBAL TAXES LLC	to enter or generate my P
	rautionze		

6	0	2	9	8	as
Ent don	er fiv i't en	e di ter a	gits, all ze	but ros	as

my

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.

Your signature ►

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

Enter five digits, but don't enter all zeros

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

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

Spouse's signature Data Data Data Data Data Data Data Dat							 		
Practitioner PIN Method Returns Only—continue									
Part III	Certification and Authentication – Practitioner PIN Method Only								
ERO's EFII	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2	 	 0 all zei	 2	7 1	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 D								
-	Iust Retain This Form — See Instructions This Form to the IRS Unless Requested To Do So								
For Denemory Deduction Act Nation and your to		Earm 8879 (Bay, 01 2021)							

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

REV 02/16/24 PRO

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		turn	202	3	OMB No. 1545	-0074	IRS Use (Dnly—[Do not wr	ite or sta	aple in this space.
For the year Jan	. 1–Dec	e. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	S	See sep	arate i	instructions.
Your first name	and mi	 iddle initial	Last r	name						 Y	our soo	cial sec	urity number
		LIGRAMA D	JAI	N									0298
		s first name and middle initial	Last										security number
Home address (numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	Apt. no.	P	resider	tial Ele	ection Campaigr
4006,N S	TOR	YRD						1	025				ou, or your
City, town, or po	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP co	ode		•	0	jointly, want \$3 nd. Checking a
IRVING				-		ТΣ	K	751	38		0		not change
Foreign country	name			Foreign p	rovince/state/	count	ty	Foreig	n postal co	de y	our tax	_	_
												Yo	ou Spouse
Filing Status	X	Single					Head of he	ouseh	old (HOH))			
Check only		Married filing jointly (even if only o	ne hao	d income)			_						
one box.		Married filing separately (MFS)					Qualifying						
		ou checked the MFS box, enter the			pouse. If you	u che	ecked the HOF	l or QS	SS box, e	nter t	he chil	d's na	me if the
	qu	alifying person is a child but not you	ir dep	endent:									
Digital	At ar	ny time during 2023, did you: (a) rec	eive (a	s a reward	d, award, or	payr	ment for prope	rty or :	services);	or (b) sell,		
Assets	exch	ange, or otherwise dispose of a dig	ital as	set (or a fi	nancial inter	est ir	n a digital asse	t)? (Se	e instruc	tions	.)	🗌 Ye	es 🛛 No
Standard	Som	eone can claim: 🗌 You as a de	pende	ent	Your spous	e as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	ı						
Age/Blindness	You	Were born before January 2, 1	959	Are b	lind Sno	ouse	• 🗌 Was bor	n hefr	ore Janua	rv 2 ·	1959		s blind
-	-		000		•			14		-			see instructions):
Dependents		irst name Last name		(2) :	Social security number	/	(3) Relationsh to you	ip (Child ta		· · ·		or other dependents
lf more than four	(.,	2401 14110							Γ	7			
dependents,									C	1			
see instructions and check	;								C	1			
here]			
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	see instruc	ctions) .						1a		81,610.
	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .						1b		
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	ı (see i	nstructior	ıs)						1c		
attach Forms	d	Medicaid waiver payments not rep	orted	on Form(s) W-2 (see i	nstru	uctions)				1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom F	orm 2441	, line 26						1e		
was withheld.	f	Employer-provided adoption bene								•	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						· ·		•	1h		0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			1 i						
	<u>z</u>	Add lines 1a through 1h	· .		· · ·					•	1z	_	81,610.
Attach Sch. B if required.	2 a		2a				axable interest			•	2b		3.
	<u>3a</u>		3a		2.		Ordinary divider			•	3b		2.
Standard	4a -		4a -				axable amoun			•	4b		
Deduction for—	5a		5a				axable amoun			•	5b		
 Single or Married filing 	6a	, _	6a				axable amoun	ι		÷	6b		
separately, \$13,850	c -	If you elect to use the lump-sum e				•	,	• •			-		207
 Married filing 	7 0	Capital gain or (loss). Attach Scher Additional income from Schedule		•	•		, check here	• •			7	+	-327.
jointly or Qualifying	8 9	Additional income from Schedule Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	,				• • • •	• •		•	8		81,288.
surviving spouse, \$27,700	9 10	Add lines 12, 20, 30, 40, 50, 60, 7 Adjustments to income from Sche				201110	e	• •		•	10	-	01,200.
 Head of 	11	Subtract line 10 from line 9. This is			aross incor	 ne		• •		•	11	+	81,288.
household, \$20,800	12	Standard deduction or itemized						• •		•	12	+	13,850.
 If you checked any box under 	13	Qualified business income deduct								•	13		,000.
Standard	14	Add lines 12 and 13				. 555				•	14		13,850.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	· · o or le	ss. enter	 -0 This is v	· ·	taxable incom	e .	••••	•	15	+	67,438.
					y					•			

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

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	10,141.
Credits	17	Amount from Schedule 2, lin	e3				[17	
	18	Add lines 16 and 17					[18	10,141.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	10,141.
	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	10,141.
Payments	25	Federal income tax withheld							
•	а	Form(s) W-2				25a 10	,343.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	10,343.
If you have a	26	2023 estimated tax payment	s and amount a	pplied from 20)22 return		[26	
qualifying child,	27	Earned income credit (EIC)			No .	27	[
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	e15			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	10,343.
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	202.
	35a	Amount of line 34 you want	refunded to you	. If Form 8888	3 is attached, che	ck here	. 🗆 🛛	35a	202.
Direct deposit?	b	Routing number 1 1 1	0 0 0 6	1 4	c Type: 🛛 🗙	Checking	Savings		
See instructions.	d	Account number 5 9 3	9 0 9 1	9 2					
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe					
You Owe		For details on how to pay, g	o to <i>www.irs.go</i> u	//Payments or	see instructions			37	
	38	Estimated tax penalty (see in	structions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee	ins	tructions				🗌 Yes. C	omplete be	low.	X No
	De nai	signee's		Phone no.			onal identific ber (PIN)	ation	
0:		der penalties of perjury, I declare th	at I have examined		accompanying sche		. ,	boet	of my knowledge and
Sign		ief, they are true, correct, and com							, ,
Here	Yo	ur signature		Date	Your occupation		If the I	RS ser	nt you an Identity
				2410			Protec	tion Pl	IN, enter it here
Joint return?					PRODUCTIO	N ENGINEER	(see in	st.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an
your records.							(see in		ection PIN, enter it here
	Dh	(60) (20) (20) (20) (20) (20) (20) (20) (2	1	Email address			(
		one no. (682)252-817 eparer's name	⊥ Preparer's signat	Email address	SUAIN@STR	JKMYER.COM Date	PTIN		Check if:
Paid					מעדדאיי האדדאיי		P02082	702	Self-employed
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPIA IALLAM	02/28/2024			
Use Only		n's name GLOBAL TAX			J 08816				678)965-9522
			Y CT E BRU	INSWICK N			Firm's		84-3171965 Form 1040 (2023)
GO IO WWW.Irs.go	JV/FOM	n1040 for instructions and the late	st mormation.		BAA	REV 02/16/24 PRO			Form 1040 (2023)

REV 02/16/24 PRO

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

SWASTHIK SALIGRAMA D JAIN

Your social security number

699-76-0298

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below.		(d) Proceeds	(e) Cost	(g) Adjustment to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, F line 2, column	Part I,	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	626.	585.			41.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				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	41.

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

lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss	from	(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum		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	225.	593.			-368.
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	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
13	Capital gain distributions. See the instructions		13			
14	Carryover	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	-	.,		15	-368.

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 -327.
	• 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 (327.)
	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.	

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Schedule D (Form 1040) 2023

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

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



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

Name(s) shown on return Social security number or taxpayer identification number SWASTHIK SALIGRAMA D JAIN 699-76-0298

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.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I 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 Form 1099-B

1 (a) Description of property (Example: 100 sh. XYZ Co.)	Date acquired dispose	(c) Date sold or	of (sales price)	(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e)
		disposed of (Mo., day, yr.)			(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/23	12/31/23	626.	585.			41.
2 Totals. Add the amounts in column negative amounts). Enter each tot: Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and inc is checked), lir	lude on your 1e 2 (if Box B	626.	585.			41.

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

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

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

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SWASTHIK SALIGRAMA D JAIN

Social security number or taxpayer identification number 699-76-0298

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

[] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate instructions.			(h) Gain or (loss) Subtract column (e)
					(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/22	12/31/23	225.	593.			-368.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked).		225.	593.			-368.	

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

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