IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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						
SAURAV PATI	794-77-9286						
Spouse's name	Spouse's social security number						
RICHA AGRAWAL	797-49-6799						
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Ente	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	1 197,211.						
2 Total tax	2 16,459.						
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 35,006.						
4 Amount you want refunded to you	4 18,547.						
5 Amount you owe							

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

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

		-		EBO firm name	5	Ē	1
X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN		/

7	9	2	8	6	
Ent don	er fiv n't er	/e di nter a	gits, all ze	but ros	as

my

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

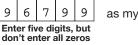
I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC ERO firm name to enter or generate my PIN

Date



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 🕨	Date I					 		
Practitioner PIN Method Returns Only—continu	e bel	ow						
Part III Certification and Authentication – Practitioner PIN Method Only						 		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	 	 	0 III zer	 2 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 🕨	
	ERO Must Retain This Form — Se Don't Submit This Form to the IRS Unless		
Fau Danamusula Daduatian (And Madine and secondary seture in demodiance	DEV 00/07/04 DDO	Form 8870 (Day, 01.0001)

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

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545	-0074	IRS Use Only	—Do not w	rite or sta	ple in this space.
For the year Jan	. 1–Dec	. 31, 2023, or other tax year beginning			, 2023, ending , 20 S			See se	See separate instructions.			
Your first name	and m	 iddle initial	Last na	ime						Your so	cial sec	urity number
SAURAV			PATI	-								9286
	oouse's	s first name and middle initial	Last na									security number
RICHA			AGRA	WAT.						797	49	6799
	(numbe	er and street). If you have a P.O. box, see						A	pt. no.	-		ection Campaign
20113 97									•			ou, or your
		ce. If you have a foreign address, also co	mplete s	paces bel	ow.	Sta	te	ZIP c	ode		0.	jointly, want \$3
KENT						WA	4	980	31			nd. Checking a not change
Foreign country	name			Foreign pr	rovince/state/o	count	ty		n postal code	your tax		0
											🗌 Yo	ou 🗌 Spouse
Filing Status		Single					Head of ho	ouseh	old (HOH)			
-		Married filing jointly (even if only o	ne had i	income)					()			
Check only one box.		Married filing separately (MFS)		,			Qualifying	surviv	ving spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name o	of your s	pouse. If you	ı che	ecked the HOH	l or Q	SS box, ente	r the chi	ld's na	me if the
	qu	alifying person is a child but not you	ır deper	ndent:								
Digital	At ar	ny time during 2023, did you: (a) rec	oivo (as	a roward	award or	navn	ment for prope	rty or	services): or	(b) sell		
Digital Assets		ange, or otherwise dispose of a dig						-			ΠYe	es 🛛 No
Standard		eone can claim: You as a de		·			a dependent			,		
Deduction	_	Spouse itemizes on a separate retur	•		•		·					
		Were born before January 2, 1		Are bl		ouse		n hofe	ore January 2	1050		s blind
Dependents		•	555 L		•			14		-		see instructions):
-		irst name Last name		(2) 5	Social security number		(3) Relationsh to you	ip (Child tax c	· · ·		r other dependents
lf more than four	(.,.						,					
dependents,												
see instructions	3 —											
and check here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instruc	tions)					. 1a		215,297.
	b	Household employee wages not re	eported	on Form	(s) W-2					. 1b		
Attach Form(s) W-2 here. Also	с	Tip income not reported on line 1a	(see in	struction	s)					. 1c		
attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s	s) W-2 (see ir	nstru	ictions)			. 1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Foi	rm 2441,	line 26 .					. 1e		
was withheld.	f	Employer-provided adoption bene	fits fron	n Form 8	839, 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 insti	ructions)			1 i					
	z	Add lines 1a through 1h	. <u>.</u>							. 1z		215,297.
Attach Sch. B	2a	Tax-exempt interest	2a			b Ta	axable interest	: .		. 2b		38.
if required.	3a	Qualified dividends	3a			b 0	ordinary divider	nds .		. 3b		
	4a	IRA distributions	4a				axable amount			. 4b		
Standard Deduction for—	5a	Pensions and annuities	5a			b Ta	axable amount	t		. 5b		
Single or	6a	Social security benefits	6a			b Ta	axable amount	t		. 6b		
Married filing separately,	С	If you elect to use the lump-sum e	lection I	method,	check here	(see	instructions)		L			
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche	dule D i	f required	d. If not requ	iired,	, check here		[7		0.
jointly or	8	Additional income from Schedule	1, line 1	0						. 8		-18,124.
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-	our total inc	ome	e			. 9	_	197,211.
\$27,700 • Head of	10	Adjustments to income from Sche	dule 1,	line 26		• •				. 10		
household,	11	Subtract line 10 from line 9. This is	s your a	djusted	gross incon	ne				. 11		197,211.
\$20,800 • If you checked Γ	12	Standard deduction or itemized		•		,				. 12		79,739.
any box under Standard	13	Qualified business income deduct	ion from	n Form 8	995 or Form	899	5-A			. 13	_	
Deduction,	14	Add lines 12 and 13				• •				. 14		79,739.
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -	-0 This is y	our t	taxable incom	ie .		. 15		117,472.

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 🗌	[1	16	16,459.
Credits	17	Amount from Schedule 2, lin	ne3				1	17	
	18	Add lines 16 and 17					1	18	16,459.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		1	19	
	20	Amount from Schedule 3, lin	ne8				2	20	
	21	Add lines 19 and 20					2	21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			2	22	16,459.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .		2	23	0.
	24	Add lines 22 and 23. This is	your total tax				2	24	16,459.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a 35	,006.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c					2	5d	35,006.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	22 return .		2	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	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits	3	32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments			3	33	35,006.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid	3	34	18,547.
	35a	Amount of line 34 you want	refunded to you	. If Form 8888	is attached, che	ck here	. 🗌 🛛	5a	18,547.
Direct deposit?	b	Routing number 1 1 1			c Type: 🛛 🗙	Checking	Savings		
See instructions.	d	Account number 6 3 8	2 8 9 5	5 0					
	36	Amount of line 34 you want a	applied to your	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24							
You Owe		For details on how to pay, g	o to <i>www.ir</i> s.gov	//Payments or	see instructions		3	37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party		you want to allow another	person to disc	cuss this retu	rn with the IRS?			_	_
Designee	ins	structions					omplete belo		< No
	De: nar	signee's ne		Phone no.			onal identificat per (PIN)	ion	
Sign		der penalties of perjury, I declare th	nat I have examined		accompanying sche		. ,	est of m	v knowledge and
Sign		ief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation		If the IRS	3 sent yc	ou an Identity
		0					Protectio	on PIN, e	enter it here
Joint return?						MS ANALYST	(see inst		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat	tion			our spouse an on PIN, enter it here
your records.					SOFTWARE	FNGINFFR	(see inst		in Fill, enter it here
	Ph	one no. (469)925-382	0	Email address		1340@GMAIL.CO)M		
		eparer's name	Preparer's signat		DAUNAV.FALL	Date	PTIN	Ch	neck if:
Paid		M PRIYA RAM SAGAR GUPTA			AR GUDTA	04/13/2024	P0208270		Self-employed
Preparer		m's name GLOBAL TAX			JUNC OUF IA	01/13/2024			8)965-9522
Use Only			Y CT E BRU	NSWICK N.	J 08816		Firm's E		84-3171965
Go to www.irc.or		1040 for instructions and the late		TIONICIC IN			111115		Form 1040 (2023)
30 10 WWW.113.90		in the instructions and the late	sciniornation.		BAA	REV 03/07/24 PRO			· Jill • J • (2023)

REV 03/07/24 PRO

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 2023

Attachment Sequence No. **01** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SAURAV PATI & RICHA AGRAWAL 794-77-9286

Par	t Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	. 1	
2a	Alimony received		
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		
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-18,124.
6	Farm income or (loss). Attach Schedule F.		
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)	_	
ο	Section 951A(a) inclusion (see instructions) . . . 80	_	
р	Section 461(I) excess business loss adjustment	_	
q	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		
t	Pension or annuity from a nonqualifed deferred compensation plan or		
	a nongovernmental section 457 plan	_	
u	Wages earned while incarcerated	_	
Z	Other income. List type and amount:		
0	Tatal other income. Add lines to through 97		
9 10	Total other income. Add lines 8a through 8z	. 9	
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		-18,124.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		ule 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	s 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:			
 a	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the		-	
D	rental of personal property engaged in for profit			
с	Nontaxable amount of the value of Olympic and Paralympic medals		-	
C	and USOC prize money reported on line 8m			
d			-	
	Repayment of supplemental unemployment benefits under the Trade		-	
е	Act of 1974			
			-	
f			-	
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:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter	er here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	<u></u>	26	
	BAA REVO)3/07/24 PRO	Schedule 1 (F	orm 1040) 202

SCHE	DULE	A
(Form	1040)	

Department of the Treasury Internal Revenue Service

Itemized Deductions

Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074 20

3

Go to www.irs.gov/ScheduleA for instructions and the latest information. Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Attachment Sequence No. 07

Name(s) shown on							cial security number
SAURAV PA	ΓI	& RICHA AGRAWAL			794	- 7	77-9286
Medical		Caution: Do not include expenses reimbursed or paid by others.					
and		Medical and dental expenses (see instructions)	1		_		
Dental		Enter amount from Form 1040 or 1040-SR, line 11 2					
Expenses	3	Multiply line 2 by 7.5% (0.075)	3		_		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0	•		4	4	
Taxes You	-	State and local taxes.					
Paid	a	State and local income taxes or general sales taxes. You may include					
		either income taxes or general sales taxes on line 5a, but not both. If					
		you elect to include general sales taxes instead of income taxes,	5a	1 75	-		
	ŀ	check this box .	5a 5b	<u> </u>			
		State and local personal property taxes	50 50	2,303	· ·		
		Add lines 5a through 5c	5d	4,061			
		Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing	- Cu	4,001	<u> </u>		
			5e	4,061			
	6	Other taxes. List type and amount:		1,001			
			6				
	7	Add lines 5e and 6			7	7	4,061.
Interest		Home mortgage interest and points. If you didn't use all of your home					
You Paid		mortgage loan(s) to buy, build, or improve your home, see					
Caution: Your		instructions and check this box					
mortgage interest deduction may be	a	Home mortgage interest and points reported to you on Form 1098.					
limited. See instructions.		See instructions if limited	8a	75,678	3.		
	k	Home mortgage interest not reported to you on Form 1098. See					
		instructions if limited. If paid to the person from whom you bought the					
		home, see instructions and show that person's name, identifying no., and address	Oh				
			8b		-		
		Points not reported to you on Form 1098. See instructions for special					
			8c				
	c	Reserved for future use	8d				
	e	Add lines 8a through 8c	8e	75,678	3.		
		Investment interest. Attach Form 4952 if required. See instructions	9	•			
	10	Add lines 8e and 9			1	0	75,678.
Gifts to	11	Gifts by cash or check. If you made any gift of \$250 or more, see					
Charity		instructions	11		_		
Caution: If you made a gift and	12	Other than by cash or check. If you made any gift of \$250 or more,					
got a benefit for it,		see instructions. You must attach Form 8283 if over \$500	12		_		
see instructions.		Carryover from prior year	13				
<u> </u>		Add lines 11 through 13				4	
Casualty and Theft Losses	15	Casualty and theft loss(es) from a federally declared disaster (othe disaster losses). Attach Form 4684 and enter the amount from line 1					
ment Losses		instructions				5	
Other	16	Other—from list in instructions. List type and amount:	•			-	
Itemized							
Deductions					 1	6	
Total	17	Add the amounts in the far right column for lines 4 through 16. Also, e	enter	this amount o		-	
Itemized		Form 1040 or 1040-SR, line 12				7	79,739.
Deductions	18	If you elect to itemize deductions even though they are less than your			ı, 🗌		
		check this box		[
F D		uction Act Nation and the Instructions for Form 1040			. .		

For Paperwork Reduction Act Notice, see the Instructions for Form 1040.

Schedule A (Form 1040) 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 Your social security number

20

Internal Revenue Service Name(s) shown on return

Department of the Treasury

SAURAV PATI & RICHA AGRAWAL

794-77-9286

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. This form may be easier to complete if you round off cents to		(d) Proceeds	(e) Cost	(g) Adjustment to gain or loss	from	(h) Gain or (loss) Subtract column (e) from column (d) and	
	e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, columr		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	9,135.	9,135.			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 (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	0.			

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 lines below. This form may be easier to complete if you round off cents to		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I	from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result	
	e dollars.	(sales price)		line 2, colum		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.						
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	dule(s) K-1	12				
13	Capital gain distributions. See the instructions		13				
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	-	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a 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

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

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.



Sequence No. 12A

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

Social security number or taxpayer identification number

	coolar coounty hamber of taxpayer rechanded on hamber
SAURAV PATI & RICHA AGRAWAL	794-77-9286

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	If you enter an enter a co	any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see <i>Column (e)</i> in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment		
FIDELITY BROKERAGE SERVICES LLC	01/01/23	12/31/23	9,135.	9,135.			0.	
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 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).			9,135.	9,135.			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 (Form 1040)		Supplemental Income and Loss								OMB No. 1545-0074					
•	-	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.) Attach to Form 1040, 1040-SR, 1040-NR, or 1041.								2023					
Department of the Treasury Internal Revenue Service Go to			to www.irs.gov/						nformation.	Attachment Sequence No. 13					
Name(s) shown on return											Your soci	al security			
SAURAV PATI & RICHA AGRAWAL 794-77										7-9286					
Part				m Rental Rea											
	Note: If yo	ou are in t	he bus	iness of renting p Form 4835 on p	personal proper	ty, use	Schedule	c . See	e instru	ctions. If you	are an indiv	vidual, rep	ort far	m	
Α				2023 that woul	-	to file	Form(s) 1	099? \$	See in:	structions .		. 🗌 Ye	s X	No	
				required Form			()							No	
1a				roperty (street, o											
A	,			HASTINAPUR			,	19							
B															
С															
1b	Type of Prope		For	each rental real	estate prope	erty list	ed		Fa	ir Rental	Person	al Use	0	QJV	
	(from list below	v)		ve, report the n						Days	Da		Q0 v		
	3			ional use days. In meet the requ				Α		365		0			
B C				lified joint ventu				B C					[╡──	
	of Property:							C					l		
	Single Family R	esidenc	e	3 Vacation/Sh	ort-Term Ren	tal	5 Land		7	Self-Rental					
	Multi-Family Re			4 Commercial			6 Roya			Other (desc	ribe)				
							-			Propert					
Incom	•							Α		B	С				
3						3			87.				•		
4						4									
Expen															
5	Advertising .					5									
6		-		ons)		6									
7	•					7		2,4	63.						
8 9						8 9									
9 10				fees		9 10									
11	•					11		1.8	20.						
12	-			nks, etc. (see ir		12									
13	Other interest					13									
14						14			63.						
15						15		3,1	.37.						
16						16		2 4	F 0						
17 18				bletion		17 18			52.						
19	Other (list)	-	-			19		J,1	.70.						
20	· · · ·			through 19 .		20		18,8	11.						
21				rents) and/or 4				•							
	result is a (loss	s), see ir	struct	ions to find out	if you must										
						21	-	-18,1	.24.						
22				loss after limita			,	10 -	· · ·	1		,			
00-				ons)		22	(18,12		() 687.	()	
23a b				t on line 3 for al				•	23a 23b		00/.				
b C															
d									23d	Į.	5,176.				
e				d on line 20 for a					23e		8,811.				
24	Income. Add p	ositive	amoui	nts shown on lir	ne 21. Do not	t includ					. 24				
25				om line 21 and re								(18,1	24.)	
26	Total rental re	eal esta	te and	d royalty incon	ne or (loss).	Combi	ine lines t	24 and	l 25. E	Enter the resi	ult				

here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 -18,124. NPA For Paperwork Reduction Act Notice, see the separate instructions.

26

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-18,124.