Form **8879**

(Rev. January 2021)

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.

OMB No. 1545-0074

Submission Identification Number (SID)	
Taxpayer's name	Social security number
AKSHAY TEJA BANKA	098-91-9981
Spouse's name	Spouse's social security number
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Ent	ter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	<u> </u>
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1 Adjusted gross income	
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amend-	
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termin payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation rebusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) is Electronic Funds Withdrawal Consent.	e U.S. Treasury and its designated Financial ndicated in the tax preparation software for ution to debit the entry to this account. This late the authorization. To revoke (cancel) a equests must be received no later than 2 he processing of the electronic payment of a payment. I further acknowledge that the
Taxpayer's PIN: check one box only X I authorize GLOBAL TAXES LLC to enter or generate	to my DIN 1 9 9 8 1
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	te my PIN Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.	
Your signature ▶ Date ▶	
Spouse's PIN: check one box only	
I authorize to enter or generat	te my PIN as my
ERO firm name	Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.	
Spouse's signature ▶ Date ▶	
Practitioner PIN Method Returns Only—continue belo	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 4 9 6 0 8 2 7 1
	Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sul requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practition PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method PIN met	bmitting this return in accordance with the
ERO's signature ▶ Date ▶	

Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

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

For the year Jan	ear Jan. 1–Dec. 31, 2023, or other tax year beginning, 2023, ending, 20					, 20		see sepa instruction		
Your first name	and i	middle initial	Last na					entify	ing nun	
							(see ins	tructio	ons)	
AKSHAY TE			BANK				098-	91-	9981	
		per and street). If you have a P.O. bo	x, see ins	structions.					Apt. ı	
16529 NE						_			MM	203
	ost of	fice. If you have a foreign address, a	ilso comp	olete spaces below.		State		ZIP c		
REDMOND		_				WA		980	52	
Foreign country	nam	e	Foreigi	n province/state/county		Foreign	postal co	зе		
Filing Status		Single	oarately (N	MFS) 🗌 Qualifyii	ng surviving spouse	(QSS)	☐ Es	tate		Trust
Check only	lf :	you checked the QSS box, enter the	child's n	ame if the qualifying pers	son is a child but not	your dep	endent:			
one box.										
Digital Assets	At a	ny time during 2023, did you: (a) rec	eive (as a	reward, award, or paym	ent for property or se	ervices);	or (b) sell,	excha	ange, or	
g		erwise dispose of a digital asset (or a							Yes	
Dependents						(4) C	heck the box	(if qua	lifies for (s	see inst.):
(see instructions):		(1) First name Last name	2	(2) Dependent's identifying number	(3) Relationship to ye	Ch	ild tax cred	it	Credit for depend	
		(1) First name Last name		idonarying nambor	(b) Helationship to yo	Ju		+	depend]
If more than four								_		<u> </u>
dependents, see instructions and										i
check here								\top		
Income	1a	Total amount from Form(s) W-2, bo	x 1 (see i	instructions)			. 1a	T	75,	238.
Effectively	b Household employee wages not reported on Form(s) W-2									
Connected										
With U.S.	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									
Trade or	e Taxable dependent care benefits from Form 2441, line 26									
Business	f Employer-provided adoption benefits from Form 8839, line 29									
Attach	g	Wages from Form 8919, line 6 .					. 1g	+-		
Form(s) W-2,	h	Other earned income (see instruction	,				. 1h			
1042-S, SSA-1042-S,	i Reserved for future use									
RRB-1042-S,										
and 8288-A	k Total income exempt by a treaty from Schedule OI (Form 1040-NR), item L, line 1(e)									
here. Also attach	z	Add lines 1a through 1h			[1K]		. 1z	1	75.	238.
Form(s)	2a		2a	1	kable interest		. 2b	+		
1099-R if tax was	3a	·	Ba		dinary dividends .		. 3b	\top		23.
withheld.	4a		la		kable amount		. 4b			
If you did not	5a	Pensions and annuities	ia 💮	b Tax	cable amount		. 5b			
get a Form W-2, see	6	Reserved for future use								
instructions.	7	Capital gain or (loss). Attach Scheo		·	•			₩		238.
	8	Additional income from Schedule 1						+		068.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and						+	65,	431.
	10	Adjustments to income from Sche	•	,.						
	44							+-	6.5	431.
	11 12	Subtract line 10 from line 9. This is		<u> </u>				+	,	<u> ±3⊥.</u>
	12	Itemized deductions (from Sched deduction (see instructions)							13	850.
	13a	Qualified business income deduction			1 1		0.			
	b	Exemptions for estates and trusts								
	С	Add lines 13a and 13b	• (•			. 130	1		0.
	14	Add lines 12 and 13c					. 14		13,	850.
	15	Subtract line 1/1 from line 11. If zero	or loce	enter -0- This is your ta	vahla inaama		15		51	581

Form 1040-NR (2023)									Page 2
Tax and	16	Tax (see instructions). Check if ar	y from Foi	rm(s): 1	314 2 49	72 3			16	6,654.
Credits	17	Amount from Schedule 2 (Form	1040), line	3					17	0.
	18	Add lines 16 and 17							18	6,654.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (Form 10	040) .			19	
	20	Amount from Schedule 3 (Form 1040), line 8								
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If z	ero or less	s, enter -0					22	6,654.
	23a	Tax on income not effectively co Schedule NEC (Form 1040-NR),				23a				
	b	Other taxes, including self-empl line 21	-		,	23b				
	С	Transportation tax (see instruction	ons)			23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is you	ur total ta	x					24	6,654.
Payments	25	Federal income tax withheld from	n:							
-	а	Form(s) W-2				25a	1	3,817.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c							25d	13,817.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments ar	nd amount	applied from 20	22 return				26	
	27	Reserved for future use				27				
	28	Additional child tax credit from S	Schedule 8	812 (Form 1040)	28				
	29	Credit for amount paid with Forn	n 1040-C			29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Form	,.			31				
	32	Add lines 28, 29, and 31. These	are your t o	otal other paym	ents and refund	able cre	edits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26	, and 32. T	hese are your to	otal payments				33	13,817.
Refund	34	If line 33 is more than line 24, su				•	-		34	7,163.
	35a	—							35a	7,163.
Direct deposit?	b	Routing number 1 1 1 0 0 0 6 1 4 c Type: Checking Savings								
See instructions.	d	Account number 6 9 5 0 8 8 9 0 3								
	е	If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here.								
	36	Amount of line 34 you want app				36				
Amount	37	Subtract line 33 from line 24. Th		-						
You Owe		For details on how to pay, go to	www.irs.g	ov/Payments or	see instructions				37	
	38	Estimated tax penalty (see instru				38				(C.1)
Third	Do yo	ou want to allow another person to	discuss t	his return with th	ne IRS? See instru	uctions.	∐ Ye	es. Comp	lete bel	ow. 🗵 No
Party	Desig			Phone				nal identif	ication	
Designee	name						-	er (PIN)		
		penalties of perjury, I declare that I hat they are true, correct, and complete. I								
Sign	,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		. , ,		mormane			ent you an Identity
Here	Your signature			Date	Your occupation	1		I .		PIN, enter it here
Here					SOFTWARE DEVE	LOPMEN	T ENGINE		inst.)	,
	Phone	e no.		Email address	•					
Paid	Prepa	rer's name	Preparer	's signature		Date		PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PR	RIYA RAM SAGAH	R GUPTA TALLAM	02/2	0/2024	P0208	2703	Self-employed
Preparer		s name GLOBAL TAXES	LLC			•		Phone n		78)965-9522
Use Only		address 245 ROONEY (RUNSWICK N	J 08816			Firm's E		4-3171965
	/_	10.101/0.1								1040 ND (0000)

BAA

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

AKSHAY TEJA BANKA

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

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

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

	Sequence No. 01
Your soc	ial security number
098-91	-9981

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att		5	-10,068.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
- 1	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	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:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Ente	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8	<u> </u>	10	-10,068.

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				
	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	24i		-	
J	Housing deduction from Form 2555	24j		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k		-	
Z	Other adjustments. List type and amount:				
05	Tatal allows allow to some Add lines Ode thousands Ode	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 Form 1040, 1040-SR, or 1040-NR, line 10	. ∟nter	nere and on		
				26	I. 4 (F 1010) 0000
	BAA	REV 02/	11/24 PRO	Schedu	le 1 (Form 1040) 2023

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

Department of the Treasury Internal Revenue Service

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number AKSHAY TEJA BANKA 098-91-9981 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)					
			Nature of income			(a) 10%	(b) 15%	(6) 30%	%	%
1	Dividends and divide	nd eq	uivalents:							
а	Dividends paid by U.	S. cor	porations		1a					
b	Dividends paid by fo	reign d	corporations		1b					
С	Dividend equivalent p	aymer	nts received with respect to section 871(m)	transactions	1c					
2	Interest:	-								
а	Mortgage				2a					
b			ns		2b					
С	· · · · · · · · · · · · · · · · · · ·				2c					
3										
4	Motion picture or TV	copyr	ight royalties		4					
5	Other royalties (copy	rights,	recording, publishing, etc.)		5					
6	Real property income	e and	natural resources royalties		6					
7										
8										
9					9					
10		s of C	anada only. Enter net income in column							
а	Winnings									
b	Losses		<u> </u>		10c					
11	Note: Enter winnings	only.	ountries other than Canada. Losses aren't allowed		11					
12	Other (specify):									
					12					
13	•		columns (a) through (d)		13					
14			tax at top of each column		14					
15	Tax on income not et	ffectiv	ely connected with a U.S. trade or busine	ess. Add colum	ns (a)	through (d) of line 14	4. Enter the total here	and on Form 1040	-NR, line 23a 15	
			Capital Gains a	nd Losses F	rom	Sales or Excha	inges of Proper	ty		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqu mm/dd/yyg		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
	ely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real ty interest; report these									
gains a	nd losses on Schedule D									
(Form 1	•									
exchan	property sales or ges that are effectively									
	ted with a U.S. business edule D (Form 1040),									
	797, or both.	18	Capital gain. Combine columns (f) and	d (g) of line 17	. Ente	er the net gain her	e and on line 9 abo	ove. If a loss, ente	er -0 18	

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form1040NR for instructions and the latest information.

Answer all questions.

OMB No. 1545-0074

Attachment Sequence No. 7C

Name sl	hown on Form 1040-NR				Your identifying	number	
AKSI	IAY TEJA BANKA				098-91-99	981	
Α	Of what country or countries w						
В	In what country did you claim	residence for tax purposes	s during the tax ye	ar? United States			
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident) of the United States? .		☐ Yes	⊠ No
D	Were you ever:						
1.	A U.S. citizen?					☐ Yes	⊠ No
2.	A green card holder (lawful per	rmanent resident) of the Un	ited States?			☐ Yes	⊠ No
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation ru	les that apply to you.			
E	If you had a visa on the last of immigration status on the last of			ou didn't have a visa, en	•		
F	Have you ever changed your v If you answered "Yes," indicat		tus) or U.S. immigr	ration status?		☐ Yes	⊠ No
G	List all dates you entered and	left the United States durin					
	Note: If you're a resident of C						
	check the box for Canada or	Mexico and skip to item I	<u> </u>	🗌 Canada	Mexico		
	Date entered United States	Date departed United State	es	Date entered United State			d States
	mm/dd/yy	mm/dd/yy		mm/dd/yy	n	nm/dd/yy	
			<u> </u>				
			-				
				12 11 11 21 11			
Н	Give number of days (including 2021	, 2022	, and	12023 365		_	_
ı	Did you file a U.S. income tax					⊠ Yes	☐ No
	If "Yes," give the latest year ar	id form number you filed:	<u>.</u>	1040NR			
J	Are you filing a return for a trust If "Yes," did the trust have a U.S. person, or receive a contraction	J.S. or foreign owner unde	r the grantor trust	rules, make a distribution	or loan to a	Yes Yes	⊠ No □ No
K	Did you receive total compens	ation of \$250,000 or more	during the tax year	r?		☐ Yes	⊠ No
	If "Yes," did you use an alterna	ative method to determine t	the source of this o	compensation?		☐ Yes	☐ No
L	Income Exempt From Tax—If complete (1) through (3) below				tax treaty with	a foreign	country,
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	aty benefi	t, and the
	(a) Cou	ntry	(b) Tax treaty artic	cle (c) Number of month claimed in prior tax ye		ount of exe	
	(e) Total. Enter this amount of	n Form 1040-NR, line 1k. D	o not enter it anyw	where else on line 1			
2.	Were you subject to tax in a fo		•			☐ Yes	☐ No
	Are you claiming treaty benefit					☐ Yes	⊠ No
	If "Yes," attach a copy of the C	Competent Authority detern	nination letter to yo	our return.			
M	Check the applicable box if:						
1.	This is the first year you are multiple with a U.S. trade or business to						
2.	You have made an election in States as effectively connected						

SCHEDULE D (Form 1040)

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.

OMB No. 1545-0074

Attachment

	rtment of the Treasury al Revenue Service	Go to www.irs.gov/ScheduleD fo					S	Attachment Sequence No. 12
	e(s) shown on return SHAY TEJA BANKA							curity number 9981
		ment(s) in a qualified opportunity did see its instructions for additiona	_	•		No oss.		
Pa	rt I Short-Term Ca	apital Gains and Losses—Ge	nerally Assets I	Held One Year	or Le	ss (se	e ins	tructions)
lines This	s below.	gure the amounts to enter on the omplete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	to gai	(g) djustmen in or loss s) 8949, l 2, columi	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	1099-B for which basis which you have no a However, if you choose on Form 8949, leave this	transactions reported on Form was reported to the IRS and for adjustments (see instructions). to report all these transactions in blank and go to line 1b.						
1b		s reported on Form(s) 8949 with	3,547.	3,301.			1.	247.
2	Totals for all transaction	s reported on Form(s) 8949 with	3,317.	3,301.				217.
3		s reported on Form(s) 8949 with						
4	Short-term gain from Fo	rm 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	324		4	
5		or (loss) from partnerships,			usts 	from 	5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions								()
7		gain or (loss). Combine lines 1a ses, go to Part II below. Otherwise			-	•	7	247.
Pa	rt II Long-Term Ca	pital Gains and Losses—Ger	nerally Assets H	Held More Than	One	Year	(see i	nstructions)
lines This	s below.	gure the amounts to enter on the omplete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	to gai	(g) djustmen in or loss s) 8949, f 2, columi	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	1099-B for which basis which you have no a However, if you choose	transactions reported on Form was reported to the IRS and for adjustments (see instructions). to report all these transactions in blank and go to line 8b.						
8b		s reported on Form(s) 8949 with	23.	32.				-9.
9	Totals for all transaction	s reported on Form(s) 8949 with						_
	Box F checked	s reported on Form(s) 8949 with						
12	from Forms 4684, 6781, Net long-term gain or (lo	Part I; long-term gain from Forms and 8824	 ions, estates, and	trusts from Sched	 dule(s)	 K-1	11 12 13	

14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover

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

-9.

14

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 238. • 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 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. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 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.

OMB No. 1545-0074

2023

Attachment
Sequence No. 12A

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

AKSHAY TEJA BANKA

Social security number or taxpayer identification number

098-91-9981

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) Date acquired	(c) Date sold or	(d) Proceeds	(d) Cost or other basis occeds See the Note below		f any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(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	3,547.	3,301.	W	1.	247.	
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked) or line 3 (if Box A)	al here and inc is checked), lir	lude on your ne 2 (if Box B	3 547	3 301		1	247	

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

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side AKSHAY TEJA BANKA

Social security number or taxpayer identification number 098-91-9981

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

Part II

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

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

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

✗ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on l	Form(s) 1099)-B showing bas	•		•)
(a) Description of property	(b) Date acquired	(c) (d) Date sold or Proceeds	(d) (cost or other basis Proceeds See the Note below		Adjustment, if any, to gain or los 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) from column (d) and
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g).
Robinhood Securities LLC	01/01/22	12/31/23	23.	32.			-9.
2 Totals. Add the amounts in columns	s (d), (e), (g), and	d (h) (subtract					
negative amounts). Enter each total Schedule D. line 8b (if Box D above	al here and inc	lude on your					

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) .

23.

32.

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,

Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number AKSHAY TEJA BANKA 098-91-9981 Part I **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions 1a Physical address of each property (street, city, state, ZIP code) H.NO:1-14, SIRI RESIDENCY KUKATPALLY TELANGANA IN 500072 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 480. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 1,547. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 1,025. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 1,258. 14 Repairs 15 Supplies 15 1,641. 16 16 Taxes 17 Utilities 17 1,645. 18 3,432. 18 Depreciation expense or depletion 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 10,548. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -10,068. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) -10,068.) 480. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 3,432. 23d Total of all amounts reported on line 18 for all properties 10,548. Total of all amounts reported on line 20 for all properties 23e 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 10,068. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

-10,068.

26

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

Department of the Treasury

Internal Revenue Service

Health Savings Accounts (HSAs)

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form8889 for instructions and the latest information. OMB No. 1545-0074 Attachment Sequence No. 52

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

AKSHAY TEJA BANKA

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. 098-91-9981

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required. HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse. Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2023. ■ Self-only
 □ Family HSA contributions you made for 2023 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2023. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions 2 0. If you were under age 55 at the end of 2023 and, on the first day of every month during 2023, you 3 were, or were considered, an eligible individual with the same coverage, enter \$3,850 (\$7,750 for 3 3,850. Enter the amount you and your employer contributed to your Archer MSAs for 2023 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2023, also 4 Ο. 5 5 3,850. 6 Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2023, see the instructions for the amount to enter . . . 6 3,850. If you were age 55 or older at the end of 2023, married, and you or your spouse had family coverage 7 under an HDHP at any time during 2023, enter your additional contribution amount. See instructions . 0. 7 8 8 3,850. 9 Employer contributions made to your HSAs for 2023 10 2,710. 11 11 12 12 1,140. HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13 13 13 0. Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions. HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete Part II a separate Part II for each spouse. Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were 14b 14c Qualified medical expenses paid using HSA distributions (see instructions) 15 15 Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this 16 16 If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before Part III completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse. 18 18 19 19 20 Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f 20 Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 21

21

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	Your taxpayer identification number
AKSHAY TEJA BANKA	098-91-9981

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

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

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)	
i				
ii				
iii				
iv				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2		
3 4	Qualified business net (loss) carryforward from the prior year	3 (-	
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6 1.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8 1.		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	0.
10	Qualified business income deduction before the income limitation. Add lines 5 and	19	10	0.
11	Taxable income before qualified business income deduction (see instructions)	11 51,581.		
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	12 23.		
13	Subtract line 12 from line 11. If zero or less, enter -0	13 51,558.	1	
14	Income limitation. Multiply line 13 by 20% (0.20)		14	10,312.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on			
	the applicable line of your return (see instructions)		15	0.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0		16	(0.
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0		17	(0.