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

Subm	ission Identification Number (SID)		-		
Taxpay	er's name	Social securit	y numb	er	
SAN	DEEP BIKKA	894-51-	-072	9	
Spouse	's name	Spouse's soc	ial secu	ırity numb	er
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	_ ∣ er year you a	re au	thorizin	g.)
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		1		8,184.
2	Total tax		2		7,239.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		1 , 360.
4	Amount you want refunded to you		4		4,121.
5	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and penalties of perjury, I declare that I have examined a copy of the income tax return (original or amende				
to send for any Agent payme authori payme busine taxes to person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for revidelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the financial institution account in the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resolves prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the lad identification number (PIN) below is my signature for the income tax return (original or amended) I unic Funds Withdrawal Consent.	ejection of the tr U.S. Treasury a dicated in the to tion to debit the tite the authoriza quests must be e processing of payment. I furt	ansmised and its of a control o	ssion, (b) designate paration s to this ac o revoke ved no la ectronic knowledge	the reason d Financial oftware for count. This (cancel) a ater than 2 payment of ge that the
					٦
	ayer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate	1	0 -	7 2 9	
×	I authorize GLOBAL TAXES LLC to enter or generate FRO firm name	ř Ent	er five	digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.	do	i t ente	r all zeros	i
	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 met below.				
Your	signature ▶ Date ▶				
Spous	se's PIN: check one box only				_
	I authorize to enter or generate	mv PIN			as my
	ERO firm name		er five	digits, but	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros	i
	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 met below.				
Spous	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	N			
Part	Certification and Authentication — Practitioner PIN Method Only				
ERO's	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 ent	er all ze	ros	
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual income ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subsements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	mitting this retu	ırn in a	accordan) I am now ce with the
ERO's	s signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

E1040-NR 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 Jai	า. 1–🏻	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	, , 2	20	See separate instructions.
Your first name	and i	niddle initial	Last na	ame			Your iden	tifying number
							(see instru	ctions)
SANDEEP			вікк	A			894-5	1-0729
Home address	(num	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.
1445 CAN	ERE	URY LANE						A 201
City, town, or p	ost o	fice. If you have a foreign address, als	so comp	lete spaces below.		State	ZI	P code
Mundeleir	1					IL	6	0060
Foreign country	nam nam	e	Foreig	n province/state/county		Foreign p	ostal code	
	1							
Filing		Single	arately (N	∕IFS) ☐ Qualifvi	ng surviving spouse (C)SS)	☐ Estat	e 🗌 Trust
Status		you checked the QSS box, enter the o		,	0 01 1	,		
Check only		, ,			,			
one box.							<i>a</i>	
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f					(b) sell, ex	
Dependents								qualifies for (see inst.):
(see instructions)				(2) Dependent's				Credit for other
(occ mon donone)		(1) First name Last name		identifying number	(3) Relationship to you	ı Cillic	I tax credit	dependents
If more than four							<u> </u>	
dependents, see							<u> </u>	
instructions and								
check here	<u> </u>		., .					
Income	1a	Total amount from Form(s) W-2, box	,	,				84,109.
Effectively	b	Household employee wages not rep		` '				
Connected	C	Tip income not reported on line 1a (s					1c	
With U.S.	d	Medicaid waiver payments not report		` ' '	,		1d	
Trade or	e •	Taxable dependent care benefits fro Employer-provided adoption benefit		•			1e 1f	
Business	f	Wages from Form 8919, line 6		*				
Attach	g h	Other earned income (see instruction					1g 1h	
Form(s) W-2, 1042-S,	i	Reserved for future use	,					
SSA-1042-S,	i	Reserved for future use					1j	
RRB-1042-S,	, k	Total income exempt by a treaty from			1 1			
and 8288-A here. Also	•	line 1(e)			1k			
attach	z	Add lines 1a through 1h					1z	84,109.
Form(s)	2a	Tax-exempt interest 2a	1	I	xable interest		2b	•
1099-R if tax was	За	Qualified dividends 3a		235. b Or	dinary dividends		3b	235.
withheld.	4a	IRA distributions 4a			xable amount		4b	
If you did not	5a	Pensions and annuities 5a	1	b Ta	xable amount		5b	
get a Form W-2, see	6	Reserved for future use					6	
instructions.	7	Capital gain or (loss). Attach Schedu	ıle D (Fo	rm 1040) if required. If n	ot required, check her	e [7	-3,000.
	8	Additional income from Schedule 1 (Form 10	040), line 10			8	-13,160.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effectively of	connected income .		9	68,184.
	10	Adjustments to income from Schedincome		,	•		1 1	
	11	Subtract line 10 from line 9. This is y	our adj u	usted gross income			11	68,184.
	12	Itemized deductions (from Schedu						
		deduction (see instructions)			l l	ıdia Trea	ty 12	13,850.
	13a	Qualified business income deduction	n from F	orm 8995 or Form 8995	-A . 13a			
	b	Exemptions for estates and trusts or	nly (see i	instructions)	13b			
	С	Add lines 13a and 13b						
	14							13,850.
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income		15	54 , 334.

Form 1040-NR (2023)										Page 2
Tax and	16	Tax (see instructions). Check if any	from For	m(s): 1 8	814 2	4972	2 3			16	7,239.
Credits	17	Amount from Schedule 2 (Form 1	040), line	3						17	0.
	18	Add lines 16 and 17								18	7,239.
	19	Child tax credit or credit for other	depende	ents from Sched	ule 8812 (F	orm 104	10) .			19	
	20	Amount from Schedule 3 (Form 1	040), line	8						20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18. If ze	ero or less	s, enter -0		,				22	7,239.
	23a	Tax on income not effectively con	nected w	rith a U.S. trade	or business	s from					
		Schedule NEC (Form 1040-NR), li	ne 15 .				23a				
	b	Other taxes, including self-emplo	-		•						
		line 21				Г	23b				
	C	Transportation tax (see instructio	,			L	23c				
	d	Add lines 23a through 23c								23d	
	24	Add lines 22 and 23d. This is you		x						24	7,239.
Payments	25	Federal income tax withheld from						4	1 260		
	a	Form(s) W-2				-	25a		1,360.		
	b	Form(s) 1099				Г	25b				
	C	Other forms (see instructions) .				_	25c			054	11 260
	d	Add lines 25a through 25c								25d 25e	11,360.
	e f	Form(s) 8805								25e	
		Form(s) 1042-S								25g	
	g 26	2023 estimated tax payments and								26	
	27	Reserved for future use				1	27			20	
	28	Additional child tax credit from So					28				
	29	Credit for amount paid with Form		•	,		29				
	30	Reserved for future use				- t	30				
	31	Amount from Schedule 3 (Form 1				Г	31				
	32	Add lines 28, 29, and 31. These a				-		edits .		32	32
	33	Add lines 25d, 25e, 25f, 25g, 26,								33	11,360.
Refund	34	If line 33 is more than line 24, sub								34	4,121.
	35a	Amount of line 34 you want refur	ded to y	ou. If Form 888	3 is attache	d, check	k here		🗆	35a	4,121.
Direct deposit?	b										
See instructions.	d	Account number 3 5 5 0	1 3	0 3 3 7	7 7						
	е	If you want your refund check ma	ailed to ar	n address outsid	de the Unite	ed State	s not s	shown or	page 1,		
		enter it here.									
	36	Amount of line 34 you want appli	ed to you	ur 2024 estimat	ed tax .		36				
Amount	37	Subtract line 33 from line 24. This		-							
You Owe		For details on how to pay, go to	•	•		ctions .				37	
	38	Estimated tax penalty (see instruc					38				
Third	•	u want to allow another person to	discuss ti			e instruc	tions.		es. Compl		low. 🗵 No
Party Designee	Desig			Phone	;				nal identifi	cation	
Designee	name	penalties of perjury, I declare that I hav		no.					er (PIN)	a b aat a	f my lmay ladge and
		they are true, correct, and complete. De									
Sign	Your	signature		Date	Your occu	upation			If the	RS s	ent you an Identity
Here		5.9.1.4.4.1				арапо					PIN, enter it here
					SOFTWA	ARE EI	NGIN	EER	(see	inst.)	
	Phone			Email address			_		l nervi		
Paid	Prepa	rer's name		's signature			Date	- 1-	PTIN		Check if:
Preparer		I PRIYA RAM SAGAR GUPTA		PRIYA RAM	SAGAR G	UPTA	03/2	9/2024	P02082		Self-employed
Use Only		sname GLOBAL TAXES I							Phone n	,,,	78) 965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN							IN			

BAA

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment Sequence No. **01**

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SANDEEP BIKKA 894-51-0729 A Aditi

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-13,160.
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		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n	-	
0	Section 951A(a) inclusion (see instructions)	80	_	
р	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8q	-	
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 (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or	01		
	a nongovernmental section 457 plan	8t	-	
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	8z		
0	Total other income. Add lines to through 97		9	
9 10	Total other income. Add lines 8a through 8z	r here and on Form	9	
10	1040, 1040-SR, or 1040-NR, line 8	Hele alla oli formi	10	-13,160.
	10 10, 10 10 011, 01 10 10 111, 1110 0	<u> </u>	IU	10,100.

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a		_	
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b		-	
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c		-	
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
_	Act of 1974	24e		-	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful	041			
_	discrimination claims (see instructions)	24h		-	
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect tax law violations	04:			
	Housing deduction from Form 2555	24i 24j		-	
J	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	24 j		-	
k	1041)	24k			
_		24K		-	
Z	Other adjustments. List type and amount:	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income			23	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		07/24 PRO		le 1 (Form 1040) 2023
	BAA	INEV U3/	ULIZA FINO	uu	

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 SANDEEP BIKKA 894-51-0729 Enter **amount of income** under the appropriate rate of tax. See instructions.

	Nature of Income		(a) 100/	(b) 450/	(a) 200/	(d) Other	(specify)
	Nature of income		(a) 10%	(b) 15%	(c) 30%	%	%
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations	1a					
b	Dividends paid by foreign corporations	1b					
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2	Interest:						
а	Mortgage	2a					
b	Paid by foreign corporations	2b					
С	Other	2c					
3	Industrial royalties (patents, trademarks, etc.)	3					
4	Motion picture or TV copyright royalties	4					
5	Other royalties (copyrights, recording, publishing, etc.)	5					
6	Real property income and natural resources royalties	6					
7	Pensions and annuities	7					
8	Social security benefits	8					
9	Capital gain from line 18 below	9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0						
а							
b	Winnings Losses	10c					
11	Gambling - Residents of countries other than Canada.						
	Note: Enter winnings only. Losses aren't allowed	11					
12	Other (specify):						
		12					
13	Add lines 1a through 12 in columns (a) through (d)	13					
14	Multiply line 13 by rate of tax at top of each column	14					
<u>15</u>	Tax on income not effectively connected with a U.S. trade or business. Add column					NR, line 23a 15	
	Capital Gains and Losses F	-rom	Sales or Excha	nges of Proper	ty	1	
losses f	hely the capital gains and rom property sales or ges that are from sources the United States and not the capital gains and comproperty sales or gift in the capital gains and good in the		(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. s. Do not include a gain						
or loss	on disposing of a U.S. real						
gains a	y interest; report these and losses on Schedule D						
(Form 1	,						
exchan	property sales or ges that are effectively						
						()	
	18 Capital gain. Combine columns (f) and (g) of line 17	. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r -0 18	

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

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

Answer all questions.

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

Name sl	nown on Form 1040-NR				Your identifying	number				
SANI	EEP BIKKA				894-51-0729					
Α	Of what country or countries w	vere you a citizen or nation	al during the tax ye	ear? INDIA						
В	In what country did you claim	residence for tax purpose	s during the tax ye	ear? United States						
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident	t) of the United States? .		☐ Yes	⊠ No			
D	Were you ever:									
							⊠ No			
2.	A green card holder (lawful per	,				Yes	⊠ No			
_	If you answer "Yes" to (1) or (2									
E	If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax year. $_{\rm F1}$									
F	Have you ever changed your v If you answered "Yes," indicat	isa type (nonimmigrant sta e the date and nature of the	tus) or U.S. immigi e change:	ration status?		☐ Yes	⊠ No			
G	List all dates you entered and	left the United States durin	g 2023. See instru	ctions.						
	Note: If you're a resident of C				_					
	check the box for Canada or				☐ Mexico					
	Date entered United States	Date departed United Stat	es	Date entered United State		arted Unite	d States			
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	mm/dd/yy				
			<u> </u>							
			<u> </u>							
н	Give number of days (including	vacation nonworkdays and	 I nartial days) you y	were present in the United	States during:					
	2021			•	•					
ı	Did you file a U.S. income tax					⊠ Yes	☐ No			
	If "Yes," give the latest year ar									
J	Are you filing a return for a trus					☐ Yes	⊠ No			
	If "Yes," did the trust have a l									
	U.S. person, or receive a contr	·				☐ Yes	☐ No			
K	Did you receive total compens		-			☐ Yes	⊠ No			
	If "Yes," did you use an alterna			-		∐ Yes	□ No			
L	Income Exempt From Tax-If complete (1) through (3) below	. See Pub. 901 for more in	formation on tax tr	eaties.						
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	eaty benefi	t, and the			
	(a) Cou	ntry	(b) Tax treaty artic	cle (c) Number of month claimed in prior tax ye		nount of exe	•			
_	(e) Total. Enter this amount of		=							
	Were you subject to tax in a fo					∐ Yes	∐ No ⊠ N∍			
3.	Are you claiming treaty benefit		-			∐ Yes	⊠ No			
М	If "Yes," attach a copy of the C Check the applicable box if:	competent Authority detern	illiation letter to yo	our return.						
	This is the first year you are ma									
0	with a U.S. trade or business u	, ,								
2.	You have made an election in States as effectively connected									

SCHEDULE D (Form 1040)

Department of the Treasury

Capital Gains and Losses

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Go to www.irs.gov/ScheduleD for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. **12**

Internal Revenue Service Name(s) shown on return Your social security number 894-51-0729 SANDEEP BIKKA Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. (e) Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (g) 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 789,860. 859,932. 45,164. -24,908.Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -24,908. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g)

lines below.		Proceeds Cost to gain or				from column (d) and
This faces was the analysis to accomplate if you was all off a contact and			(or other basis)	Form(s) 8949, Part II, line 2, column (g)		combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Form from Forms 4684, 6781, and 8824			, ,	11	
12	Net long-term gain or (loss) from partnerships, S corpora	tions, estates, and	trusts from Sched	dule(s) K-1	12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 13 of y	-	-	14	(
15	Net long-term capital gain or (loss). Combine lines 88 on the back	_		to Part III	15	

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** -24,908. 16 Combine lines 7 and 15 and enter the result 16 • 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. ☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 3,000.) • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

Sales and Other Dispositions of Capital Assets

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

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

OMB No. 1545-0074

2023
Attachment Sequence No. 12A

Internal Revenue Service

Name(s) shown on return

SANDEEP BIKKA

Department of the Treasury

Social security number or taxpayer identification number 894-51-0729

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★ (B) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	•	,		e)
(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)
(Example: 100 sh. XYZ Co.)		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	789,860.	859,932.	W	45,164.	-24,908.
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 e is checked), lir	lude on your ne 2 (if Box B	789,860.	859,932.		45,164.	-24,908.

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

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s)	s) shown on return						Your socia	al security	number
SAND	DEEP BIKKA						894-5	1-0729	
Part	Income or Loss From Rental Real Estate Note: If you are in the business of renting personal pro rental income or loss from Form 4835 on page 2, line 4	perty, use		e C. See	instruc	tions. If you a	re an indiv	vidual, rep	ort farm
Α [Did you make any payments in 2023 that would require y	ou to file	Form(s)	1099? 5	See ins	tructions .		. <u>Y</u> e	s 🛚 No
B I	f "Yes," did you or will you file required Form(s) 1099?							. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city, state,								
	DR 125 NAGENDRA NAGAR NORTH BYPASS C		<u> </u>	N D D 7	חדסוו	TN 50000	2		
A B	DR 123 NAGENDRA NAGAR NORTH BIPASS C	NGOLE,	, ANDRI	RAPRA.	DESH	IN 32300			
1b	Type of Property (from list below) 2 For each rental real estate property above, report the number of f					r Rental Days	Person Da		QJV
A	g above, report the number of r			Α		365	Da	0	
B	if you meet the requirements	to file as	a	В		363			
	qualified joint venture. See ins	structions	3.	C					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term F	Rontal	5 Land	4	7	Self-Rental			
	Multi-Family Residence 4 Commercial	iciitai	6 Roya			Other (descri	ibe)		
			1						
Incom				Α		Propertie B	es: 		С
Incom 3	Rents received	3			54.	ь			
4	Royalties received	4		/	J4.				
Exper		- 4							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		2 4	15.				
8	Commissions	8		۷, ۹	13.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1 0	68.				
12	Mortgage interest paid to banks, etc. (see instructions	-		1, 9	00.				
13	Other interest	13							
14	Repairs	14		3 7	42.				
15	Supplies	15			65.				
16	Taxes	16		3, 3	03.				
17	Utilities	17		1 8	24.				
18	Depreciation expense or depletion	18			21.				
19	Other (liet)	10							
20	Total expenses. Add lines 5 through 19	20		13,9	14				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties).	_		10,3					
21	result is a (loss), see instructions to find out if you mu								
	file Form 6198	21		- 13 , 1	60.				
22	Deductible rental real estate loss after limitation, if an on Form 8582 (see instructions)			·13 , 16)	()
23a	Total of all amounts reported on line 3 for all rental pro				23a		754.		
b	Total of all amounts reported on line 4 for all royalty pr				23b				
c	Total of all amounts reported on line 12 for all properti	-			23c				
d	Total of all amounts reported on line 18 for all properti				23d				
e	Total of all amounts reported on line 20 for all properti				23e	13	,914.		
24	Income. Add positive amounts shown on line 21. Do			sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real es		•		nter tot	al losses here		(13,160.
26	Total rental real estate and royalty income or (loss								
_0	here. If Parts II, III, and IV, and line 40 on page 2 do								
	Schedule 1 (Form 1040), line 5. Otherwise, include this						26		-13,160.