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 security number					
AKH	IL REDDY BENDHI	877-15	877-15-6700				
Spouse	's name	Spouse's soo	ial sec	urity numbe	r		
Part	Tax Return Information — Tax Year Ending December 31, 2023 (En	ter year you a	re au	thorizing.	.)		
	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	2	, 550.		
2	Total tax		2		0.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3				
4	Amount you want refunded to you		4				
5 Part	Amount you owe		5	Our rotu	<u>0.</u>		
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amend			•			
to send for any Agent payme author payme busine taxes person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transdomy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for a delay 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 into formy federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation may be adays 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 laid identification number (PIN) below is my signature for the income tax return (original or amended) and Funds Withdrawal Consent.	rejection of the to U.S. Treasury andicated in the toution to debit the attention to debit the attention to debit the equests must be the processing of the payment. I fur	ransmind its of ax prepared entry ation. The receipt the electrical entry at the electrical entry entr	ssion, (b) the designated paration so to this according revoke (ved no late lectronic packnowledge	ne reason Financial ftware for bunt. This cancel) a er than 2 ayment of that the		
Taxpa	ayer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or genera	5	6	7 0 0	00 my		
	ERO firm name	ř En		digits, but	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 if you are entering your own PIN and your return is filed using the Practitioner PIN me below.						
Yours	signature ► Date ►						
Snow	oc's PINs shock one boy only						
Spou	se's PIN: check one box only I authorize to enter or genera	to my DINI			ac my		
	ERO firm name		ter five	digits, but	as my		
	signature on the income tax return (original or amended) I am now authorizing.			er 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.						
Spous	se's signature ▶ Date ▶						
	Practitioner PIN Method Returns Only—continue belo	w					
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	eros			
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 suments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	bmitting this retu	ırn in a	accordance			
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 Jan. 1-Dec. 31, 2023, or other tax year beginn				nning, 2023, ending, 20				instructions.		
Your first name and middle initial							Your ide	our identifying number		
							(see inst	(see instructions)		
AKHIL REI	DDY		BEND	HI			877-	15-6700		
Home address	(numl	per and street). If you have a P.O. box	, see ins	structions.				Apt. no.		
1701 E 12	TH	ST						W-14A		
City, town, or p	ost of	ffice. If you have a foreign address, al	so comp	lete spaces below.		State	- 2	ZIP code		
CLEVELAND)					ОН		44114		
Foreign country	nam	е	Foreig	n province/state/county		Foreign p	ostal coc	de		
Filing		Single Married filing sepa	arately (N	MES) Qualifyir	ng surviving spouse ((OSS)	☐ Esta	ate 🗌 Trust		
Status		you checked the QSS box, enter the		,	0 .	,				
Check only		,				,				
one box.										
Digital Assets		ny time during 2023, did you: (a) rece erwise dispose of a digital asset (or a					' (b) sell, e 			
Dependents		a.speed e. a a.g.ta. asset (e. a.g.		lintor out in a digital accord). (220 mandenene.)	-		if qualifies for (see inst.):		
(see instructions):				(2) Dependent's		1	d tax credit	Cradit for other		
(000 111011110110110).		(1) First name Last name	identifying number		(3) Relationship to yo	ou Cilli	Lax Cledit	dependents		
If more than four							Ц			
dependents, see							<u> </u>			
instructions and										
check here	<u> </u>						Н.			
Income	1a	Total amount from Form(s) W-2, box	•	•				2,500.		
Effectively	b	Household employee wages not rep		` '						
Connected	C	Tip income not reported on line 1a (
With U.S.	d	Medicaid waiver payments not repo	. 1d							
Trade or	e •	Taxable dependent care benefits from Employer-provided adoption benefit		•			. <u>1e</u> . 1f			
Business	f	Wages from Form 8919, line 6		·						
Attach	g h	Other earned income (see instruction					. <u>1g</u> . 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			tem I.					
and 8288-A here. Also		line 1(e)			1k					
attach	z	Add lines 1a through 1h					. 1z	2,500.		
Form(s)	2a	Tax-exempt interest 2	a	b Tax	able interest		. 2b			
1099-R if tax was	За	Qualified dividends 3a	1	b Ord	linary dividends .		. 3 b			
withheld.	4a	IRA distributions 4a	3	b Tax	able amount		. 4b			
If you did not	5a	Pensions and annuities 5a	1	b Tax	able amount		. 5b			
get a Form W-2, see	6	Reserved for future use								
instructions.	7	Capital gain or (loss). Attach Schedu	,	, ,	•	_	_	50.		
	8	Additional income from Schedule 1	(Form 10	040), line 10						
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and	B. This is	s your total effectively c	onnected income		. 9	2,550.		
	10	Adjustments to income from Schedincome	•	,.						
	11	Subtract line 10 from line 9. This is y	our adj u	usted gross income			. 11	2,550.		
	12	Itemized deductions (from Schedu								
		deduction (see instructions)			Std Dedn US/I	ndia Tre	aty 12	13,850.		
	13a	Qualified business income deduction	n from F	orm 8995 or Form 8995-	A . 13a					
	b	Exemptions for estates and trusts o	nly (see	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 tax	kable income .		. 15	0.		

Form 1040-NR (2	2023)								Page 2
Tax and	16	Tax (see instructions). Check if any	from For	m(s): 1 88	14 2 497	2 3 🗌		16	0.
Credits	17	Amount from Schedule 2 (Form 1	040), line	3				17	0.
	18	Add lines 16 and 17						18	0.
	19	Child tax credit or credit for other	depende	ents from Schedu	ule 8812 (Form 10	40)		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	0.
	23a	Tax on income not effectively con	nected w	rith a U.S. trade o	or business from				
		Schedule NEC (Form 1040-NR), li	ne 15 .			23a			
	b	Other taxes, including self-emplo	yment ta	x, from Schedule	e 2 (Form 1040),				
		line 21				23b			
	С	Transportation tax (see instruction	ns)			23c			
	d	Add lines 23a through 23c						23d	
	24	Add lines 22 and 23d. This is you						24	0.
Payments	25	Federal income tax withheld from	:						
•	а	Form(s) W-2				25a			
	b	Form(s) 1099				25b			
	С	Other forms (see instructions) .				25c			
	d	Add lines 25a through 25c						25d	
	е	Form(s) 8805						25e	
	f	Form(s) 8288-A						25f	
	g	Form(s) 1042-S						25g	
	26	2023 estimated tax payments and	d amount	applied from 20	22 return			26	
	27	Reserved for future use				27			
	28	Additional child tax credit from So				28			
	29	Credit for amount paid with Form				29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3 (Form 1				31			
	32	Add lines 28, 29, and 31. These a	re your to	otal other paym	ents and refunda	ble credits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, a						33	
Refund	34	If line 33 is more than line 24, sub						34	
	35a	Amount of line 34 you want refun	ded to y	ou. If Form 8888	is attached, chec	k here	. 🗆	35a	
Direct deposit?	b	Routing number X X X X				Checking			
See instructions.	d	Account number X X X X	ХХ	X X X X			-		
	е	If you want your refund check ma					page 1,		
		enter it here.					. •		
	36	Amount of line 34 you want appli				36			
Amount	37	Subtract line 33 from line 24. This	is the an	nount you owe.					
You Owe		For details on how to pay, go to w	vww.irs.g	ov/Payments or	see instructions .			37	0.
	38	Estimated tax penalty (see instruc	ctions) .			38			
Third	Do yo	u want to allow another person to	discuss tl	his return with th	e IRS? See instruc	ctions.	es. Compl	ete bel	ow. 🗵 No
Party	Desig	signee's Phone Personal identifi							
Designee	name		er (PIN)						
		penalties of perjury, I declare that I have they are true, correct, and complete. De							
Sign	Yours	sianature		Date	Your occupation		If the	IRS se	ent you an Identity
Here	Your signature Date Your occupation								PIN, enter it here
					SOFTWARE E	NGINEER	(see	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	IYA RAM SAGAR	GUPTA TALLAM	03/03/2024	P02082	703	Self-employed
Preparer	Firm's	sname GLOBAL TAXES L	LC				Phone no	o. (6	78)965-9522
Use Only	Firm's	address 245 DOONEY C		TINICIATOR NI	T 00016		Firm's FI		4-3171965

BAA

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

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

Name shown on Form 1040-NR Your identifying number AKHIL REDDY BENDHI 877-15-6700 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income			(a) 10% (b) 15%	(b) 15%	(b) 15% (c) 30%		(d) Other (specify)			
						(a) 1070	(b) 1370	(6) 30 70	%	%
1	Dividends and divide	nd eq	uivalents:							
а	Dividends paid by U.	S. cor	porations		1a					
b	Dividends paid by fo	reign (corporations		1b					
С		_	nts received with respect to section 871(m) tr		1c					
2	Interest:		. ,							
а	Mortgage				2a					
b			18		2b					
С					2c					
3			s, trademarks, etc.)		3					
4	• "		ight royalties		4					
5	•		, recording, publishing, etc.)		5					
6		-	natural resources royalties		6					
7					7					
8					8					
9					9					
10		s of C	anada only. Enter net income in column (c)							
а	Winnings									
b	Losses				10c					
11	Gambling - Resident	s of c	ountries other than Canada. Losses aren't allowed		11					
12					· · ·					
12					12					
13			columns (a) through (d)		13					
14			tax at top of each column		14					
15			ely connected with a U.S. trade or business			through (d) of line 1	1 Enter the total her	and on Form 1040	-NR. line 23a 15	
	Tax on moonic not c	ICCLIV	Capital Gains and						TVI I, IIIIC ZOG	
Enter only the capital gains and losses from property sales or exchanges that are from sources		16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy		(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).
	he United States and not ely connected with a U.S.		descriptive details not snown below)						Subtract (u) from (e).	Subtract (e) from (u).
busines	ss. Do not include a gain									
propert	on disposing of a U.S. real y interest; report these									
gains a (Form 1	nd losses on Schedule D								 	
•	property sales or								 	
exchan	ges that are effectively ted with a U.S. business	4-7	Add columns (A cod (-) -f line 40						1	
on Sch	edule D (Form 1040),									
Form 4	797, or both.	18	Capital gain. Combine columns (f) and (g) or line 17	. ⊨nte	er une net gain ner	e and on line 9 ab	ove. ir a ioss, 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

2023

Attachment Sequence No. 7C

vame	snown on Form 1040-NR			Your identifying						
AKI	IL REDDY BENDHI			877-15-67	700					
Α	Of what country or countries were you a citizen or nation	al during the tax year?	? INDIA							
В	In what country did you claim residence for tax purpose	s during the tax year?	United States							
С	Have you ever applied to be a green card holder (lawful p	permanent resident) of	the United States? .		Yes	⊠ No				
D	Were you ever:	•								
1	. A U.S. citizen?				Yes	⊠ No				
2	A green card holder (lawful permanent resident) of the Ur				Yes	⊠ No				
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,									
Е	If you had a visa on the last day of the tax year, enter			ter vour U.S						
_	immigration status on the last day of the tax year.			-						
F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?										
•	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?									
G	List all dates you entered and left the United States durin	ng 2023. See instruction								
_	Note: If you're a resident of Canada or Mexico AND co			ent intervals						
	check the box for Canada or Mexico and skip to item I			☐ Mexico						
	Date entered United States Date departed United State		ate entered United States		rtad I Inita	d States				
	mm/dd/yy mm/dd/yy	103	mm/dd/yy		nm/dd/yy	d Otatos				
Н	Give number of days (including vacation, nonworkdays, and	 d nartial davs) vou were	e present in the United S	States during:						
••	2021, 2022									
ı	Did you file a U.S. income tax return for any prior year? .	, and 20		···	X Yes	□No				
•	If "Yes," give the latest year and form number you filed:									
J	Are you filing a return for a trust?				Yes	⊠ No				
•	If "Yes," did the trust have a U.S. or foreign owner under									
	U.S. person, or receive a contribution from a U.S. persor				☐ Yes	□No				
K	Did you receive total compensation of \$250,000 or more				☐ Yes	⊠ No				
	If "Yes," did you use an alternative method to determine				☐ Yes	□No				
L	Income Exempt From Tax—If you are claiming exempt		•			_				
_	complete (1) through (3) below. See Pub. 901 for more in			ar troaty with	a rororgi	oountry,				
1	Enter the name of the country, the applicable tax treaty ar	ticle, the number of mo	onths in prior years you	claimed the tre	atv benefi	t. and the				
	amount of exempt income in the columns below. Attach F				. ,	,				
	(a) Country	(b) Tax treaty article	(c) Number of month	s (d) Am	(d) Amount of exempt					
	.,	,	claimed in prior tax ye		n current to	•				
	(e) Total. Enter this amount on Form 1040-NR, line 1k. [Do not enter it anywhe	re else on line 1							
2	. Were you subject to tax in a foreign country on any of the	e income shown in 1(d	l) above?		Yes	☐ No				
3	Are you claiming treaty benefits pursuant to a Competen	t Authority determinati	ion?		☐ Yes	⊠ No				
	If "Yes," attach a copy of the Competent Authority determ	mination letter to your	return.							
М	Check the applicable box if:									
1	This is the first year you are making an election to treat in		erty located in the Unite	ed States as eff	ectively c	onnected				
	with a U.S. trade or business under section 871(d). See in					🗌				
2	You have made an election in a previous year that has									
	States as effectively connected with a U.S. trade or busing	ness under section 87	1(d). See instructions .			\square				

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

	al Revenue Service Go to www.irs.gov/ScheduleD fo	or instructions and	the latest informat	ion.	3	Sequence No. 12
	(s) shown on return HIL REDDY BENDHI					ecurity number
	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona					
Pa	Tt I Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines	instructions for how to figure the amounts to enter on the below. 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,	from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
	e dollars.	((* * * * * * * * * * * * * * * * * * *	line 2, colum		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					
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 (le	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	rusts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise			e any long-	7	
Pa	t II Long-Term Capital Gains and Losses—Ger	nerally Assets H	leld More Than	One Year	(see i	nstructions)
	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colum	Part II,	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	172.	122.			50.
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					
12	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824	ions, estates, and	trusts from Scheo		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

50.

14

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 50. • 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? X 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? X 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), 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 ☐ 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 (2023) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side AKHIL REDDY BENDHI

Social security number or taxpayer identification number 877-15-6700

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

Part II

broker and may even tell you which box to check.

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.

	reported on I	Form(s) 1099	-B showing bas	sis was reported	to the IRS (see Note above)					
(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS											
(F) Long-term transactions not reported to you on Form 1099-B											
(a) Description of property	(b)	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below		Su					

1 (a) Description of property	(b) (c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)			
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(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	172.	122.			50.	
_								
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	172.	122.			50.			

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.