Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

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

Submission Identification Number (SID)

Taxpay	xpayer's name Social security number						
CHA	NDANI MISHRA	807-72-2055					
Spouse	s's name	Spouse's social security number					
Par	Tax Return Information – Tax Year Ending December 31, 2023 (Ente	r year you a	are auth	orizing.)			
Enter	whole dollars only on lines 1 through 5.						
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1	Adjusted gross income		1	44,304.			
2	Total tax		2	3,239.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	6,311.			
4	Amount you want refunded to you		4	3,072.			
5	Amount you owe		5				
Part	Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)						

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

Taxpayer's PIN: check one box only

I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN	
		ERO firm name		E

	2 Ent	2 er fiv	0 ve dig	5 aits.	5 but	as
	2	2	0	Ŭ	5	as

my

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

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

Your signature 🕨

X

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	mv	PIN
ιO	CITCI	UI.	yenerale	iiiy	1 11 1

as mv Enter five digits, but don't enter all zeros

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

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

Spouse's signature >	Date ►			
Practitioner PIN Method Returns Only—continue below				
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 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 tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature 🕨			Date 🕨			
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So						
For Denemicarly Deduction Act No				Earm 8879 (Bay, 01 2021)		

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/07/24 PRO

1040		artment of the Treasury—Internal Revenue Serv S. Individual Income Tax		turn	202	23	OMB No. 1545-	-0074	IRS Use Only	/—Do not v	rite or st	aple in this space.
For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, en	ding			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number
CHANDANI	-		MIS	HRA						807	72	2055
		s first name and middle initial	Last r									I security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	Apt. no.	Preside	ntial Ele	ection Campaigr
_855 SHEF	RRY I	LN S KRUGERVILLE								1		ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ate	ZIP c	ode	· ·	•	jointly, want \$3 nd. Checking a
AUBREY						TΣ	X	762	27			not change
Foreign country	name			Foreign p	rovince/state	/coun	ity	Foreig	n postal code	your ta:	_	_
											Yo	ou Spouse
Filing Status	; <u>×</u>	Single					Head of ho	buseh	old (HOH)			
Check only	L	Married filing jointly (even if only o	ne hao	l income)								
one box.		Married filing separately (MFS)					Qualifying		• •	. ,		
		ou checked the MFS box, enter the			pouse. If yo	ou che	ecked the HOH	l or Q	SS box, ente	er the ch	ild's na	me if the
	qu	alifying person is a child but not you	ur depe	endent:								
Digital	At ar	ny time during 2023, did you: (a) rec	eive (a	s a rewar	d, award, o	^r payr	ment for proper	rty or	services); or	(b) sell,		
Assets	exch	hange, or otherwise dispose of a dig	ital as	set (or a fi	nancial inte	rest ir	n a digital asse [.]	t)? (Se	e instructio	ns.)	Y	es 🛛 No
Standard	Som	leone can claim: 🗌 You as a de	pende	ent 🗌	Your spous	se as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	ו					
Age/Blindness	S You	: 🗌 Were born before January 2, 1	959	🗌 Are b	lind Sp	ouse	: 🗌 Was bor	n befo	ore January	2, 1959		s blind
Dependents	s (see	instructions):		(2)	Social securit	v	(3) Relationshi				ifies for	(see instructions):
If more		irst name Last name		(-)	number	y	to you		Child tax c	redit	Credit fo	or other dependents
than four												
dependents,												
see instructions and check	s											
here 🗌												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	see instru	ctions) .					. 1a	ı 📃	48,832.
Attach Form(s)	b	Household employee wages not re	•		. ,					. 1t		
W-2 here. Also	С	Tip income not reported on line 1a			,					. 10	_	
attach Forms W-2G and	d	Medicaid waiver payments not rep			, ,		,			. 10	_	
1099-R if tax	e	Taxable dependent care benefits f			,			• •		. 1e	-	
was withheld.	f	Employer-provided adoption bene						• •		. <u>1</u> f		
lf you did not get a Form	g	Wages from Form 8919, line 6 .				• •		• •		. <u>1</u> g		0.
W-2, see	h	Other earned income (see instruct	,			• •	· · · · ·	· ·	• • •	. 1h		0.
instructions.	i	Nontaxable combat pay election (Add lines 1a through 1h	see ins	structions)	• •	🔲			. 1z		48,832.
Attach Sch. B	z 2a	S I	2a		· · ·	 ьт	axable interest		• • •	· 12	_	10,032.
if required.	2a 3a		2a 3a				Drdinary divider			. 21. . 31.	-	
	 4a		4a				axable amount			. 4t	_	
Standard							axable amount			. 5b	_	
 Deduction for — Single or 	6a		6a				axable amount			. 6t	-	
Married filing	c	If you elect to use the lump-sum e		n method.	check here				[
separately, \$13,850	7	Capital gain or (loss). Attach Sche				•	,		[7		1,991.
 Married filing jointly or 	8	Additional income from Schedule								. 8		-6,519.
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9		44,304.
\$27,700	10	Adjustments to income from Sche								. 10		
 Head of household, 	11	Subtract line 10 from line 9. This is			gross inco	me				. 11		44,304.
\$20,800 • If you checked п	12	Standard deduction or itemized	deduc	ctions (fro	m Schedul	e A)				. 12	2	13,850.
any box under	13	Qualified business income deduct	ion fro	m Form 8	995 or Forr	n 899	95-A			. 13		
Standard Deduction,	14	Add lines 12 and 13								. 14	·	13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	ro or le	ess, enter	-0 This is	your	taxable incom	е.		. 15	;	30,454.

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

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	3,239.
Credits	17	Amount from Schedule 2, lin	ie 3					17	
	18	Add lines 16 and 17						18	3,239.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ie 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	3,239.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is						24	3,239.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 6	, 311.		
	b	Form(s) 1099				25b		1	
	с	Other forms (see instructions	s)			25c		1	
	d	Add lines 25a through 25c	<i>.</i>					25d	6,311.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	22 return .			26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from			-	28		1	
	29	American opportunity credit	from Form 8863	8, line 8		29		1	
	30	Reserved for future use .		-		30		1	
	31	Amount from Schedule 3. lin				31		1 !	
	32	Add lines 27, 28, 29, and 31	32						
	33	Add lines 25d, 26, and 32. T		-	-			33	6,311.
Refund	34	If line 33 is more than line 24						34	3,072.
noruna	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	is attached, che	ck here	. 🗆	35a	3,072.
Direct deposit?	b								
See instructions.	d								
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24							
You Owe	0.	For details on how to pay, g						37	
	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another	,						
Designee		structions	•				omplete b	elow.	🗙 No
Ū	De	signee's		Phone			onal identif	ication	
	na			no.			ber (PIN)		
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com							
Here			ploto. Doolaration (,			• •	, ,
	YO	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE ENGINEER		(see i		.,
See instructions.	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat	tion			nt your spouse an
Keep a copy for your records.									ection PIN, enter it here
your records.							(see i	nsi.)	
		one no. (302) 390-287		Email address	CHANDANIMISH	RA2460GMAIL.C		,	
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer			SYAM PRIY	A RAM SAG	GAR GUPTA	03/15/2024	P02082		Self-employed
Use Only		m's name GLOBAL TAX							678)965-9522
			Y CT E BRU	NSWICK N	J 08816		Firm'	s EIN	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 2

Attachment

Internal Revenue Service	' Co to unusu inc acu/Earm10/0 for instructions and the latest intermedian					
Name(s) shown on Fo	Your soc	ial security number				
CHANDANI MISHR	A	807-72	-2055			
		·				

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. Att	ach Schedule E .	5	-6,519.
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	_	
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81	_	
m	Olympic and Paralympic medals and USOC prize money (see			
		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 (<u>/</u>	
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:	0-		
0	Total other income. Add linco 8a through 87	8z		
9 10	Total other income. Add lines 8a through 8z		9	
10	1040, 1040-SR, or 1040-NR, line 8		10	-6,519.
For Pa	perwork Reduction Act Notice, see your tax return instructions.			1 (Form 1040) 2023
	per l'en autorité de l'étaile de l		Soncadie	

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-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)		
b	Deductible expenses related to income reported on line 8I from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans		
g	Contributions by certain chaplains to section 403(b) plans 24g		
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award		
	from the IRS for information you provided that helped the IRS detect		
	tax law violations	_	
j	Housing deduction from Form 2555	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)	_	
z	Other adjustments. List type and amount:		
	24z		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	26	
	BAA REV 03/07/24 PRO	Schedule	1 (Form 1040) 2023

SCHEDULE	D
(Form 1040)	

Capital Gains and Losses

OMB No. 1545-0074

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

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

20**23** Attachment Sequence No. **12**

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

CHANDANI MISHRA

Your social security number

807-72-2055

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

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

lines This	nstructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	4,484.	4,143.			341.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88		4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1			usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	-	6	()		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	., .		7	341.

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

See instructions for how to figure the amounts to enter on the lines below.		(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.		(sales price)	(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	5,430.	3,780.			1,650.
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	1 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824					
12	Net long-term gain or (loss) from partnerships, S corporat	dule(s) K-1	12			
13	Capital gain distributions. See the instructions		13			
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	-	14	()		
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•	.,		15	1,650.

Part	III Summary	· · · · ·
16	Combine lines 7 and 15 and enter the result	16 1,991.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 both gains? 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? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. 	
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	 The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) 	21 ()
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.	
	No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	
		• · · · • • • · · · · · · · · · · · · ·

BAA REV 03/07/24 PRO

Schedule D (Form 1040) 2023

Form **8949**

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

Sales and Other Dispositions of Capital Assets

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



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

Social security number or taxpayer identification number

CHANDANI MISHRA

-	
807-72-2055	

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 Form 1099-B

1 (a) Description of property	(b)	Date solu or		(e) Cost or other basis See the Note below	If you enter an enter a c	f 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.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) (g) Code(s) from instructions Amount of adjustment		from column (d) and combine the result with column (g).	
Robinhood Securities LLC	01/01/23	12/31/23	4,484.	4,143.			341.	
2 Totals. Add the amounts in columnegative amounts). Enter each to Schedule D, line 1b (if Box A abor above is checked), or line 3 (if Box	tal here and inc ve is checked), li	lude on your ne 2 (if Box B	4,484.	4,143.			341.	

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

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

Form 8949 (2023)	Attachment Sequence No. 12A
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Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side CHANDANI MISHRA

Social security number or taxpayer identification number 807-72-2055

Page 2

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

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

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

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

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

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

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

1 (a) Description of property	(b) (c) Date sold or		(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, i 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	5,430.	3,780.			1,650.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked).		5,430.	3,780.			1,650.	

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.

	Department of the Treasury Internal Revenue Service Go to www.irs.gov/ScheduleE for instructions and the la							Attachment				
) shown on return									Your socia		
()	IDANI MISHR	Δ									2-2055	
Part	I Income Note: If yo	or Los	the business of	ntal Real Estate an f renting personal proper 1835 on page 2, line 40.			e C . See	e instru	ictions. If you			
A [hat would require you	to file	Form(s)	1099? 8	See in	structions .		. 🗌 Ye	es 🛛 No
B li	f "Yes," did you	ı or will y	ou file requir	ed Form(s) 1099? .							. 🗌 Ye	es 🗌 No
1 a	Physical add	ress of e	ach property	(street, city, state, ZIF	P code	e)						
Α	Sector 79	, NOII	DA UTTAR	PRADESH IN 2013	301							
В												
C										1		1
1b	Type of Prope (from list below		above, rep	ental real estate prope ort the number of fair	rental	and		Fa	air Rental Days	Person Da		QJV
Α	3			se days. Check the Q			Α		365		0	
В				the requirements to f int venture. See instru			В					
C			quanteaje				С					
•••	of Property:							_				
	Single Family R			ation/Short-Term Ren	ital	5 Lanc			Self-Rental			
2	Multi-Family Re	esidence	e 4 Con	nmercial		6 Roya	alties	8	Other (desc	ribe)		
									Propert	ies:		
Incom							Α		В			С
3					3		4	50.				
_4		ived .			4							
Expen					-							
5	•				5 6							
6 7			,		7			300.				
8	•				8							
9					9							
10					10							
11	-	-			11		6	500.				
12	•			c. (see instructions)	12							
13	Other interest				13							
14	Repairs				14			975.				
15	Supplies .				15		1,3	375.				
16					16							
17					17		2,2	219.				
18		expense	or depletion		18							
19	Other (list)			- 10	19 20							
20	•		•	h 19	20		6,9	969.				
21	result is a (los	s), see ir	nstructions to	and/or 4 (royalties). If find out if you must	01		-6,5	10				
22				fter limitation, if any,	21		0,0	·				
"					22	(6,51	19.	()	()
23a		-		e 3 for all rental prope				23a		450.	\	/
b				e 4 for all royalty prop				23b				
с				e 12 for all properties				23c				
d	Total of all am	ounts re	ported on line	e 18 for all properties				23d				
е				e 20 for all properties				23e	(5,969.		
24	Income. Add	positive	amounts sho	wn on line 21. Do not	t inclu	de any lo	sses			. 24		

Supplemental Income and Loss

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

SCHEDULE E

(Form 1040)

25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .

Schedule E (Form 1040) 2023

6,519.

-6,519.

OMB No. 1545-0074

9 12

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