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

IIILEIIIAI	nevertue Service							
Submi	ssion Identification Number (SID)							
Taxpaye	er's name	Social sec	urity numl	ber				
TUS	AR R MOHANTY	692-76-7871						
Spouse		Spouse's	ocial sec	urity nu	mber			
Doub	Toy Deturn Information Toy Very Finding Decomber 24 0000 /Finter			داند مال	i \			
Part	, ,	year you	are au	tnoriz	ing.)			
	whole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income		1 1		73.	127.		
2	Total tax					332.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099					955.		
4	Amount you want refunded to you					623.		
5	Amount you owe				۷,	023.		
Part				our ı	eturi	<u>1)</u>		
my knoreturn (to send for any Agent to paymer authorical paymer business taxes to person	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmed my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Upon initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account independent of the processing the return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the transfer of the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the part of the payment (PIN) below is my signature for the income tax return (original or amended) I and the payment (PIN) below is my signature for the income tax return (original or amended) I are the payment of the payment (PIN) below is my signature for the income tax return (original or amended) I are the payment of the payment (PIN) below is my signature for the income tax return (original or amended) I are the payment of the payment o	e are the a tter, or elec- ection of the S. Treasury cated in the in to debit to the autho- uests must processing ayment. I to	mounts in transmit and its extra preprint and	from the turn or ssion, design oaration this To revolute of the tectron of tectron	ne inco iginato (b) the ated F n softw accou oke (ca o later ic payredge t	ome tax or (ERO) reason inancial vare for nt. This ancel) a than 2 ment of hat the		
	nic Funds Withdrawal Consent.	Г						
-	yer's PIN: check one box only	DINI	6 7 3	8 7	1			
×	I authorize GLOBAL TAXES LLC to enter or generate ERO firm name	-	Enter five		but	as my		
	signature on the income tax return (original or amended) I am now authorizing.		don't ente	er all ze	ros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.							
Your s	ignature ▶ Date ▶							
Snous	se's PIN: check one box only	_						
Ороца	I authorize to enter or generate	my DINI				as my		
_	ERO firm name		Enter five	digits.		as my		
	signature on the income tax return (original or amended) I am now authorizing.		don't ente	•				
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.		_			_		
Spous	e's signature ▶ Date ▶							
	Practitioner PIN Method Returns Only—continue below							
Part	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	2 7	1		
			enter all ze					
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	itting this r	eturn in a	accord	anće v			
ERO's	signature ▶ Date ▶							
	ERO Must Retain This Form — See Instructions							
	Don't Submit This Form to the IRS Unless Requested To I	o So						

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



1040		artment of the Treasury—Internal Revenue Servi		urn 2	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this spac	ce.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, endi	ing			, 20		See se	oarate	instructions	 3.
Your first name	and m	iddle initial	Last nar	me							Your so	cial sec	curity numbe	
TUSAR R			MOHA	NTY							692	76	7871	
	pouse's	s first name and middle initial	Last nar										security nur	nbei
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	one					Apt. no.		Drooido	ntial Ele	ection Camp	
3436 S 3			iiioti dotic	J113.				2	•	- 1			ou, or your	aiyi
		ice. If you have a foreign address, also co	mplete si	paces below	·.	Sta	te	ZIP c			spouse	if filing	jointly, want	
WEST ALI		,				WI		532	27	- 1	•		nd. Checking	g a
Foreign country			F	oreign provi	ince/state/c				n postal c		your tax		not change ind.	
							•				,			ouse
Filing Status	s 🗵	Single	•				Head of he	ouseh	old (HOH					
Check only		Married filing jointly (even if only o	ne had iı	ncome)			_							
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ring spou	use (C	QSS)			
		you checked the MFS box, enter the			use. If you	ı che	cked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	
	qu	ıalifying person is a child but not you	ır depen	ident:										
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward, a	award, or p	payn	nent for prope	rty or	services)); or (b) sell,			
Assets	exch	nange, or otherwise dispose of a dig	ital asse	•				t)? (Se	e instru	ctions	s.)	☐ Ye	es 🗵 No	
Standard	Som	neone can claim: 🗌 You as a de	pendent	t 🗌 Yo	our spouse	as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a dua	al-status a	alien								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind	Spo	use:	: Was bor	n befo	ore Janua	ary 2,	1959		s blind	
Dependent	s (see	instructions):		(2) Soc	ial security		(3) Relationsh	ip (4) Check t	he bo	x if quali	fies for ((see instruction	ons):
If more	(1) F	(1) First name Last name		nu	ımber		to you		Child t	ax cre	dit	Credit fo	or other depend	dents
than four														
dependents, see instruction	e ——													
and check	. —													
here L]													
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		84,97	<u>4.</u>
Attach Form(s)	b	Household employee wages not re	•								1b			
W-2 here. Also	С.	Tip income not reported on line 1a (see instructions)								1c				
attach Forms W-2G and	d									1d				
1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26							1e					
was withheld.	f	Employer-provided adoption bene	tits from	1 Form 8839	9, line 29	٠					1f	_		
If you did not get a Form	g	Wages from Form 8919, line 6 .				٠					1g			
W-2, see	h	Other earned income (see instruct	,			٠		i ·			1h			0.
instructions.	İ	Nontaxable combat pay election (s	see instr	uctions) .		•	<u>li</u>				-		01 07	1
AII 1 2 : -	<u>z</u>	Add lines 1a through 1h			· ; ·	L T					1z		1,23	
Attach Sch. B if required.	2a	· –	2a	21			axable interest rdinary divide				2b		29	
	<u>3a</u> 4a		3a 4a	۷.			rainary dividei axable amoun				3b 4b			<u>.</u>
Standard		_	4a 5a				axable amoun				5b			
Deduction for— Single or	5а 6а	_	5а 6а				axable amoun				6b			
Married filing	C	If you elect to use the lump-sum e		method ch						· Ė	1			
separately, \$13,850	7	Capital gain or (loss). Attach Sche		•	,		,				7		-17	9
Married filing	8	Additional income from Schedule		•	•					٠ ـ	8		-13,18	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	•								9		73,12	
surviving spouse, \$27,700	10	Adjustments to income from Sche		•							10		,	•
Head of household,	11	Subtract line 10 from line 9. This is									11	_	73,12	7
\$20,800	12	Standard deduction or itemized	-	-							12		13,85	
If you checked any box under	13	Qualified business income deduct		,							13			<u> </u>
Standard Deduction,	14										14		13,85	0 -
see instructions.	15	Subtract line 14 from line 11. If zer							=		15		59 27	

Form 1040 (202)	3)								Page 2	
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 4972	з 🗌		. 16	8,332.	
Credits	17	Amount from Schedule 2, lin	ne 3					. 17		
	18	Add lines 16 and 17						. 18	8,332.	
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			. 19		
	20	Amount from Schedule 3, lin	ne 8					. 20		
	21	Add lines 19 and 20						. 21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. 22	8,332.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			. 23	0.	
	24	Add lines 22 and 23. This is	your total tax					. 24	8,332.	
Payments	25	Federal income tax withheld	from:							
-	а	Form(s) W-2				25a	10,9	55.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						. 25d	10,955.	
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)			No .	27				
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	2		28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin								
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ındable cr	edits .	. 32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				. 33	10,955.	
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you over	paid .	. 34	2,623.	
	35a	Amount of line 34 you want	refunded to you	u. If Form 8888	is attached, chec	ck here .		☐ 35a	2,623.	
Direct deposit?	b	Routing number 1 1 1			c Type:	Checking	Sav	ings		
See instructions.	d	Account number 2 5 2	5 3 6 9	8 9						
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe						
You Owe		For details on how to pay, go	_	-				. 37		
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party		you want to allow another	•			_				
Designee						. UY	•	olete below.		
		esignee's me		Phone no.			Personal number (identification PIN)		
Sign	Un	der penalties of perjury, I declare th	nat I have examine	d this return and	accompanying sche	dules and sta	atements, a	nd to the best	of my knowledge and	
Here	be	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to th pelief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							rer has any knowledge.	
Here	Yo	ur signature		Date	Your occupation				ent you an Identity	
						-~		Protection F (see inst.)	PIN, enter it here	
Joint return? See instructions.		accessor alamateura. If a laint vatuum l	a a 41a marro ta ai am	Data	QUALITY EN			, ,	<u> </u>	
Keep a copy for				Date	Spouse's occupati	on			ent your spouse an ection PIN, enter it here	
your records.								(see inst.)		
	Ph	one no. (518)364-613	1	Email address	TUSAR.MOHAN	TY@GMAI	L.COM			
Doid	Pre	eparer's name	Preparer's signat	ture		Date	PT	IN	Check if:	
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/06/2	2024 P0	2082703	Self-employed	
Preparer	Fir	m's name GLOBAL TAX	XES LLC					Phone no.	(678)965-9522	
Use Only	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816			Firm's EIN	84-3171965	
<u> </u>	-/-	4040 ()	11.6						- 1010	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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.

TUSA	R R MOHANTY		692-76	-78	71
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. Atta	ach Schedule	E .	5	-13,188.
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 ()		
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	Total other income. Add lines 8a through 8z	8z	_	0	
9	Total other income. Add lines oa through oz		· · <u>L</u>	9	

10

-13,188.

10

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

Par	t II 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	· <u> </u>			
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:				
0 -		24z		0-	
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			26	
	BAA	REV 02/	23/24 PRO	Schedu	le 1 (Form 1040) 2023

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

OMB No. 1545-0074

2023

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

TUSAR R MOHANTY

Your social security number
692-76-7871

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. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. line 2. column (a) with column (a) 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 306. 314. -8. 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 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 -8. 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) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 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 740. 569. -171.Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

-171

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Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -179.• 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 179.) 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**

Department of the Treasury

Internal Revenue Service

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.

2023
Attachment
Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return TUSAR R MOHANTY Social security number or taxpayer identification number 692-76-7871

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.

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 (Example: 100 sh, XYZ Co.) (Mo. day, yr.) (Mo. day, yr.)	Date sold or	Proceeds	(e) Cost or other basis See the Note below	Adjustment, if If you enter an enter a co See the sepa	(h) Gain or (loss) Subtract column (e)	
		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).
COINBASE	09/22/23	09/22/23	306.	314.			-8.
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 above is checked).	al here and inc is checked), lir	lude on your ne 2 (if Box B	306.	314.			-8.

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 $TUSAR\ R\ MOHANTY$

Social security number or taxpayer identification number 692-76-7871

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	Form(s) 1099	-B showing b	•	,)
1	(b)	(c)	(d)	(e) Cost or other basis	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f).	

(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	enter a code in column (f). See the separate instruction Column (e) separate (f) (g)		(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.			from column (d) and combine the result with column (g).
COINBASE	02/08/21	09/22/23	314.	512.			-198.
Robinhood Securities LLC	01/01/23	12/31/23	255.	228.			27.
2 Takala Add the amounts in advance	(d) (a) (a)	d //s\ /s/s.tus = 1					
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your ne 9 (if Box E	569.	740.			-171.

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.

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.

OMB No. 1545-0074

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

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

Attachment Sequence No. 13

Your social security number

TUS.	AR R MOHANTY						692-70	6-7871	
Par	Note: If you are in the business of renting personal proper	rty, use S		C. See	instru	ctions. If you a	re an indiv	/idual, rep	ort farm
	rental income or loss from Form 4835 on page 2, line 40.								
	Did you make any payments in 2023 that would require you								
В	If "Yes," did you or will you file required Form(s) 1099? .							. <u></u>	es U No
1a	Physical address of each property (street, city, state, ZII	P code)							
Α	BHUBANESWAR ODISHA ODISHA IN 751018								
В									
С									
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental a	nd		Fa	ir Rental Days	Person Da		QJV
Α	personal use days. Check the Q		only	Α		365		0	
В	if you meet the requirements to find a qualified joint venture. See instru			В					
С				С					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren		5 Land			Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	lties	8	Other (descr	ibe)		
						Properti			
Incor	me:			Α		. В			С
3	Rents received	3		6	00.				
4	Royalties received	4							
Ехре	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,2	30.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,0	23.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14			65.				
15	Supplies	15		2,4	51.				
16	Taxes	16							
17	Utilities	17			44.				
18	Depreciation expense or depletion	18		3,0	75.				
19	Other (list)	19		10 0	0.0				
20	Total expenses. Add lines 5 through 19	20		13,7	88.				
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	_	13,1	88.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (13,18		()	(
23a	Total of all amounts reported on line 3 for all rental prope	,			23a	•	600.		,
b	Total of all amounts reported on line 4 for all royalty prop				23b				
C	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d	3	,075.		
е	Total of all amounts reported on line 20 for all properties				23e	13	,788.		
24	Income. Add positive amounts shown on line 21. Do not						. 24		
25	Losses. Add royalty losses from line 21 and rental real estat		-		nter to	tal losses here	e 25	(13,188.)
26	Total rental real estate and royalty income or (loss).	Combin	e lines 2	24 and	25. E	nter the resu	lt		
	here. If Parts II, III, and IV, and line 40 on page 2 do no	ot apply	to you,	also e	nter th	nis amount o			
	Schedule 1 (Form 1040), line 5. Otherwise, include this at	mount ir	n the tot	al on li	ne 41	on page 2	. 26		-13,188.