Department of the Treasury Internal Revenue Service

Calendar Year — Due **04/15/2024**

2024 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**. Write your social security number and '2024' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order......

487.

REV 03/07/24 PRO 1555

644-29-6523 Sudhir Appasaheb Nimbalkar

3323 DENALI DR IRVING TX 75063

Department of the Treasury Internal Revenue Service

Calendar Year — Due **06/17/2024**

2024 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**. Write your social security number and '2024' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

487.

REV 03/07/24 PRO 1555

644-29-6523 SUDHIR APPASAHEB NIMBALKAR

3323 DENALI DR IRVING TX 75063

Department of the Treasury Internal Revenue Service

Calendar Year — Due **09/16/2024**

2024 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**. Write your social security number and '2024' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

487.

REV 03/07/24 PRO 1555

644-29-6523 SUDHIR APPASAHEB NIMBALKAR

3323 DENALI DR IRVING TX 75063

Department of the Treasury Internal Revenue Service

Calendar Year — Due **01/15/2025**

2024 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**. Write your social security number and '2024' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order......

487.

REV 03/07/24 PRO 1555

644-29-6523 Sudhir Appasaheb Nimbalkar

3323 DENALI DR IRVING TX 75063

Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

Social accurity number

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

Submission Identification Number (SID)

Taypayar'a nama

Taxpayer 3 hame	Social security number								
SUDHIR APPASAHEB NIMBALKAR	644-29-6523								
Spouse's name	Spouse's social security number								
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter year you are authorizing.)									
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 88,481.								
2 Total tax									
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 10,952.								
4 Amount you want refunded to you	4								
5 Amount you owe	5 773.								
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and I	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

X I authorize	GLOBAL TAXES LLC	to enter or generate my PIN $^{ m L}$
---------------	------------------	---------------------------------------

Enter five digits, but don't enter all zeros									
9	6	5	2	3					

my

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.

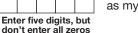
Your signature

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN



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 si	gnature 🕨 🛛 Da	ate 🕨									
	Practitioner PIN Method Returns Only—continue below										
Part III	Certification and Authentication – Practitioner PIN Method Only										
ERO's EFIN	J/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2			6 nter a		2	7	1

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 🕨	
	O Must Retain This Form — See mit This Form to the IRS Unless		
For Department Deduction Act Nation and	us tox seture instructions	DEV 03/07/34 DBO	Earm 8879 (Bay, 01 2021)

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

IF you live in	THEN use this address to send in your payment					
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214					
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000					
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501					
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303					

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V 2023**

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service



Form 1040-V Payment Voucher

Use this voucher when making a payment with Form 1040. Do not staple this voucher or your payment to Form 1040.

Make your check or money order payable to the 'United States Treasury.' ► Write your social security number (SSN) on your check or money order.

SUDHIR APPASAHEB NIMBALKAR

3323 DENALI DR IRVING TX 75063

Enter the amount

of your payment . . 1555 773.

REV 03/07/24 PRO

INTERNAL REVENUE SERVICE

P.O. BOX 1214 CHARLOTTE, NC 28201-1214

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		turn	202	3	OMB No. 1545	5-0074	IRS Use Only	∕—Do not w	vrite or staple in this space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See se	parate instructions.
Your first name	and mi	iddle initial	Last r	name						Your so	cial security number
SUDHIR A	APPAS	SAHEB	NIM	BALKAF	ξ					644	29 6523
		s first name and middle initial	Last r		-						's social security number
										486	93 7384
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	pt. no.		ntial Election Campaign
3323 DE1	JALI	DR								Check I	here if you, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP o	ode		if filing jointly, want \$3
IRVING						TΣ	ζ	750	63	, v	o this fund. Checking a low will not change
Foreign country	/ name			Foreign p	rovince/state/o	count	ty	Foreig	n postal code		x or refund.
											🗌 You 🔄 Spouse
Filing Status	; [Single					Head of h	ouseh	old (HOH)		
Check only] Married filing jointly (even if only or	ne hac	l income)							
one box.	X	Married filing separately (MFS)					Qualifying	survi	ving spouse	(QSS)	
		you checked the MFS box, enter the						H or Q	SS box, ente	er the chi	ild's name if the
	qu	alifying person is a child but not you	ır depe	endent: _ [RASHMI SIDD	ANN	A BIRADAR				
Digital	Atar	ny time during 2023, did you: (a) rece	eive (a	s a rewar	d award or	navr	ment for prope	ertv or	services): or	(h) sell	
Assets		hange, or otherwise dispose of a digi	•					•	,	. ,	🗌 Yes 🛛 No
Standard	Som	neone can claim: 🗌 You as a de	pende	nt 🗌	Your spouse	e as	a dependent	, .			
Deduction		Spouse itemizes on a separate return	•		dual-status a	alien	1				
Age/Blindnes	s You:	: Were born before January 2, 1	959	Are b	lind Spo	ouse	: 🗌 Was bo	rn befo	ore January 2	2, 1959	Is blind
Dependent		•		(2)	Social security		(3) Relationsh	14			ifies for (see instructions):
If more		irst name Last name			number		to you		Child tax c	redit	Credit for other dependents
than four											
dependents,											
see instruction and check	s —										
here]										
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	ee instruc	ctions)					. 1a	105,748.
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2					. 1b	ı
W-2 here. Also	С	Tip income not reported on line 1a	(see i	nstructior	ıs)					. 1c	;
attach Forms W-2G and	d	Medicaid waiver payments not rep	orted	on Form(s	s) W-2 (see ir	nstru	uctions)			. 1d	1
1099-R if tax	е	Taxable dependent care benefits f	rom F	orm 2441	, line 26 .					. 1e	,
was withheld.	f	Employer-provided adoption bene	fits fro	m Form 8	8839, line 29					. 1f	
If you did not get a Form	g	Wages from Form 8919, line 6 .								. 1g	,
W-2, see	h	Other earned income (see instructi	,				· · · ·	· ·		. 1h	0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)			1 i	i			105 740
		Add lines 1a through 1h	· ·		· · · ·			· ·		. 1z	
Attach Sch. B if required.	2a	'	2a				axable interes			. 2b	
	<u>3a</u>		3a				Ordinary divide			. 3b	
Standard	4a		4a				axable amoun			. 4b	
Deduction for—	5a 6a		5a				axable amoun			. 5b	
 Single or Married filing 	6a	Social security benefits	6a	mathard	obool: h ====		axable amoun	n		. 6b	
separately, \$13,850	с 7	, ,		,		`	,	• •	· · · L		_1 /27
 Married filing 	7 8	Capital gain or (loss). Attach Schedule		•	•		-	• •	L	_ 7 _ 8	
jointly or Qualifying	8 9	Additional income from Schedule ⁻ Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						• •		. <u>8</u> . 9	
surviving spouse, \$27,700	9 10	Add lines 12, 20, 30, 40, 50, 60, 7, Adjustments to income from Sche		-				• •		. 9 . 10	
 Head of 		Subtract line 10 from line 9. This is						• •		. 11	
household, \$20,800	<u>11</u> 12	Standard deduction or itemized	•	-	-			• •		. 12	
 If you checked any box under 	13	Qualified business income deduction						• •		· 12	
Standard	14	Add lines 12 and 13				000		•••		. 14	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ss. enter	 -0 This is w	our f	taxable incom	 1е		. 15	
				,	y						

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	11,725.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17					[18	11,725.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	11,725.
	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	11,725.
Payments	25	Federal income tax withheld							<u>.</u>
·	а	Form(s) W-2				25a 10	,952.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction:	s)			25c			
	d	Add lines 25a through 25c	<i>.</i>					25d	10,952.
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			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31				undable credits		32	
	33	Add lines 25d, 26, and 32. T	•	-	-			33	10,952.
Refund	34	If line 33 is more than line 24						34	
	35a	Amount of line 34 you want				•	. 🗆 İ	35a	
Direct deposit?	b	Routing number X X X					Savings		
See instructions.	d	Account number X X X					Ũ		
	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 vou owe					
You Owe	•	For details on how to pay, g						37	773.
	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another	,			' See			
Designee		structions					omplete be	elow.	X No
•		signee's		Phone			onal identific	cation	
	nar			no.			per (PIN)		<u> </u>
Sign		der penalties of perjury, I declare tl ief, they are true, correct, and com							
Here		· · · · ·			,				, ,
	to	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE I	ENGINEER	(see in		,
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an
Keep a copy for your records.									ection PIN, enter it here
your records.							(see in	SI.)	
		one no. (214) 449-377		Email address	NIMBALKAR.SU	JDHIR@GMAIL.CO			
Paid		parer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	03/14/2024	P02082		Self-employed
Use Only		m's name GLOBAL TAX					Phone		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

Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SUDHIR APPASAHEB NIMBALKAR 644-29-6523

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. Attac	ch Schedule E .	5	-15,830.
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b		8b		
С		8c		
d		8d ()	
е		8e		
f		8f		
g		8g		
h		8h		
i		8i		
j		8j		
k		8k		
1	Income from the rental of personal property if you engaged in the rental			
		81		
m	Olympic and Paralympic medals and USOC prize money (see			
	,	8m		
n		8n	_	
0		80	_	
р		8p		
q		8q	_	
r		8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form			
		8s (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or	.		
	5	8t	-	
u		8u	-	
Z	Other income. List type and amount:	0_		
•		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter 1040, 1040-SR, or 1040-NR, line 8		10	-15,830.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	ule 1 (Form 1040) 2023

2023 Attachment Sequence No. **01**

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 24d		
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:		
05	Tatal athen adjustments. Add lines 04a through 04a	05	
25 06	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	06	
		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.

Your social security number

20

Attachment

Name(s) shown on return

Department of the Treasury

Internal Revenue Service

SUDHIR APPASAHEB NIMBALKAR

644-29-6523

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)

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss f		(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, P line 2, column	art I,	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	6,020.	6,448.	11	.8.	-310.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	1.	1.			0.
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		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	(1,127.)
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-1,437.

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. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis) (or other basis) (or other basis) (or other basis) (or other basis) (or other basis) (or other basis)		from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and 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.					
	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12 13	Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions				12 13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	Carryover	14	()		
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•	.,		15	

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 -1,437. • 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? **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 1,437.) • (\$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. X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

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Schedule D (Form 1040) 2023

-orm **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.

Name(s) shown on return	Social security number or taxpayer identification number					
SUDHIR APPASAHEB NIMBALKAR	644-29-6523					

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	f property Date solution			(e) Cost or other basis See the Note below	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e)	
(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	6,020.	6,448.	W	118.	-310.	
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 is checked), lir	lude on your ne 2 (if Box B	6,020.	6,448.		118.	-310.	

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

-orm **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.



Name(s) shown on returnSocial security number or taxpayer identification numberSUDHIR APPASAHEB NIMBALKAR644-29-6523

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 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 acquired	(D) Date sold or Proceeds See the Note be		(e) Cost or other basis See the Note below	See the separate 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 <i>Column (e)</i> in the separate instructions.	(f) (g) Code(s) from Amount of instructions adjustment		from column (d) and combine the result with column (g).	
Robinhood Securities LLC	01/01/23	12/31/23	1.	1.			0.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your ne 2 (if Box B	1.	1.			0.	

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

SCHEDULE E (Form 1040)		<i>(</i> _		Supplementa							OMB No	. 1545-	0074
(FOIII						2023							
	ent of the Treasury Revenue Service			Attach to Form 1040, irs.gov/ScheduleE for					nformation.		Attachment Sequence No. 13		
Name(s)	Name(s) shown on return Your social												
SUDH	SUDHIR APPASAHEB NIMBALKAR 644-29							9-6523					
Part	Part I Income or Loss From Rental Real Estate and Royalties												
	Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farr rental income or loss from Form 4835 on page 2, line 40.												
A D)id you make an	y payme	ents in 2023 tha	at would require you	to file	Form(s) 1	099? 5	See ins	structions .		. 🗌 Ye	s 🛛	No
B I	"Yes," did you	or will y	ou file required	d Form(s) 1099? .							. 🗌 Ye	s 🗌	No
1 a	Physical addr	ess of ea	ach property (s	street, city, state, ZIF	code	e)							
Α	BALAJI RES	SIDENC	Y MIRYALG	UDA TELANGANA	IN 5	508207							
B													
C								1		1			
1b	Type of Prope (from list below			tal real estate prope t the number of fair				Fa	air Rental Days	Person Da		Q	JV
Α	3	,	personal use	e days. Check the Q	JV bo>	only [Α		365		0		
В				he requirements to f			В				-	[7
С			qualified join	t venture. See instru	ctions	S	С					[
Туре	of Property:					1				1	1		
1	Single Family R	esidence	e 3 Vacat	ion/Short-Term Ren	tal	5 Land		7	Self-Rental				
2	Multi-Family Re	sidence	4 Comn	nercial		6 Roya	lties	8	Other (desc	ribe)			
									Propert				
Incom	e.						Α		B	С			
3		I			3			00.				•	
4					4								
Expen					-								
5					5								
6	-				6								
7	Cleaning and r	naintena	Ince		7		1,2	30.					
8	Commissions				8								
9	Insurance				9								
10					10								
11					11		1,0	00.					
12		-		(see instructions)	12								
13					13			0.0					
14					14			00.					
15 16					15 16		2,8	00.					
17					17		8 2	00.					
18					18		0,2	00.					
19	Other (list)	-	-		19								
20	· · · · · · · · · · · · · · · · · · ·			19	20		16,4	30.					
21	•		•	d/or 4 (royalties). If									
				ind out if you must									
	file Form 6198				21	-	-15,8	30.					
22				er limitation, if any,	00	/	15 03		(\ \	()
23a		-	-	3 for all rental prope	22		15,83	23a	1	600.	()
zsa b				4 for all royalty prop		· · ·		23a					
c				• • • •				23c					
d	Total of all amounts reported on line 12 for all properties 23c Total of all amounts reported on line 18 for all properties 23d												
e													
24				n on line 21. Do not						. 24			
25				and rental real estate		-		nter to	tal losses he		(1	L5,8	30.)
•••	-				0		04	05 5		.14			

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

26

-15,830.

Form 4952
Department of the Treasury

Investment Interest Expense Deduction

OMB No. 1545-0191

Attach to your tax return.

Go to www.irs.gov/Form4952 for the latest information.



Identifying number

644-29-6523

Internal Revenue Service Name(s) shown on return

SUDHIR APPASAHEB NIMBALKAR

Par	Total Investment Interest Expense		
1	Investment interest expense paid or accrued in 2023 (see instructions)	1	
2	Disallowed investment interest expense from 2022 Form 4952, line 7	2	55.
3	Total investment interest expense. Add lines 1 and 2	3	55.

Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)		
		-	
b	Qualified dividends included on line 4a 		
С	Subtract line 4b from line 4a	4c	0.
d	Net gain from the disposition of property held for investment		
е	Enter the smaller of line 4d or your net capital gain from the dispositionof property held for investment. See instructions4e		
f	Subtract line 4e from line 4d	4f	0.
g	Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions	4g	
h	Investment income. Add lines 4c, 4f, and 4g	4h	0.
5	Investment expenses (see instructions)	5	
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0	6	0.
Part	III Investment Interest Expense Deduction		
7	Disallowed investment interest expense to be carried forward to 2024. Subtract line 6 from line 3. If zero or less, enter -0-	7	55.
8	Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions	8	0.

For Paperwork Reduction Act Notice, see page 4. BAA

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Form **4952** (2023)