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.

Submission Identification Number (SID)

Тахрау	ver's name	Social securit	y numb	er				
AIS	AISHWARYA GAIKWAD 597-45-5703							
Spouse	s's name	Spouse's soc	ial secu	rity number				
Par	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	63,359.				
2	Total tax		2	6,186.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	10,426.				
4	Amount you want refunded to you		4	4,240.				
5	Amount you owe		5					
Par	Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)							

Under penalties of perjury, 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

Y	Lauthorizo	GLOBAL TA	AVES	LLC	to enter or generate my PIN	5
	I authorize	GIODAU IF	ANDO		to enter or generate my Fin	Е.
				ERO firm name		

			gits, all ze		as my
5	5	7	0	3	

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 o	r generate	my PIN

as my 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—continu	e bel	ow						
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		 6 nter a	I	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 ►							
	Retain This Form — See Form to the IRS Unless							
For Denerwork Deduction Act Nation and Vour toy rate	instructions		Form 8870 (Boy, 01 2021)					

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

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		turn	202	3	OMB No. 1545	-0074	IRS Use	Only—	Do not w	rite or sta	ple in t	this space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ing	L		, 20		See separate instructions.			
Your first name	and mi	iddle initial	Last n	ame						,	Your so	cial sec	urity	number
AISHWARY	ζA		GAI	KWAD							597	45	570	03
•		s first name and middle initial	Last n											rity number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				A	Apt. no.	I	Presider	ntial Ele	ction	Campaign
12942 SA	ANCTU	UARY COVE DR, UNIT 304	1, TE1	MPLE T	ERRACE						Check h			
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	low.	Sta	ite	ZIP c	ode					/, want \$3 necking a
TAMPA						FI	- 	336	37		o go to oox belo			•
Foreign country name				Foreign p	rovince/state/o	count	ty	Foreig	gn postal co	ode y	your tax	_		— -
		-										Yc	u	Spouse
Filing Status	; 🗵	Single					Head of he	ouseh	old (HOF	ł)				
Check only		Married filing jointly (even if only or	ne had	income)			—							
one box.	L	Married filing separately (MFS)					Qualifying							
		ou checked the MFS box, enter the			pouse. If you	ı che	ecked the HOF	l or Q	SS box, e	enter	the chil	d's na	me if	the
	qu	alifying person is a child but not you	ir aepe	endent:										
Digital	At ar	ny time during 2023, did you: (a) rece	eive (a	s a reward	d, award, or	payr	ment for prope	rty or	services)	; or (t	o) sell,			
Assets	exch	ange, or otherwise dispose of a digi	ital ass	set (or a fi	nancial intere	əst ir	n a digital asse	t)? (Se	ee instruc	ctions	s.)	☐ Ye	es [X No
Standard	Som	eone can claim: 🗌 You as a de	pende	nt 🗌	Your spouse	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or yc	ou were a	dual-status a	alien	1							
Age/Blindnes	s You:	: 🗌 Were born before January 2, 1	959	Are bl	lind Spo	ouse	: 🗌 Was bor	n befo	ore Janua	arv 2.	1959		s blind	d
Dependent	-				Social security		(3) Relationsh	1		-		ies for (see in	structions):
If more		irst name Last name	(2)	number		to you		Child ta		1			r dependents	
than four									[
dependents,									[]
see instruction	s								[
here]								[
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	ctions)						1a		81	,286.
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2..						1b			
W-2 here. Also	С	Tip income not reported on line 1a									1c			
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	uctions)	• •		• •	1d			
1099-R if tax	e	Taxable dependent care benefits f				• •		• •	• •	• •	1e			
was withheld.	f	Employer-provided adoption bene						• •		• •	1f			
lf you did not get a Form	g	Wages from Form 8919, line 6 .						• •	• •	• •	1g			0.
W-2, see	h i	Other earned income (see instruction (see instruction)						· ·		• •	1h			0.
instructions.	i z	Nontaxable combat pay election (s Add lines 1a through 1h	See IIIS	auctions)		• •					1z		81	,286.
Attach Sch. B	2	Ŭ I	2a				axable interest		•••		2b			,533.
if required.	2a 3a	· · –	2a 3a		1		Ordinary divider				25 3b	-	-	197.
	4a	-	4a				axable amoun				4b			
Standard Deduction for –	5a		5a				axable amoun				5b			
 Single or 	6a	Social security benefits	6a			bТ	axable amoun	t			6b			
Married filing separately,	с	If you elect to use the lump-sum e	lection	method,	check here ((see	instructions)			. 🗆				
\$13,850	7	Capital gain or (loss). Attach Sche				•				. 🗆	7		-2	2,470.
 Married filing jointly or 	8	Additional income from Schedule	1, line	10							8		-17	7,187.
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8	. This is y	our total inc	come	e				9		63	3,359.
\$27,700	10	Adjustments to income from Scher	dule 1	, line 26							10			
Head of household,	11	Subtract line 10 from line 9. This is	s your a	adjusted	gross incon	ne					11		63	3,359.
\$20,800 • If you checked	12	Standard deduction or itemized	deduc	tions (fro	m Schedule	A)			• •		12		13	8,850.
any box under Standard	13	Qualified business income deduction	ion fro	m Form 8	995 or Form	899	95-A				13			1.
Deduction,	14	Add lines 12 and 13	• •							• •	14			8,851.
see instructions.	15	Subtract line 14 from line 11. If zer	ro or le	ss, enter	-0 This is y	ourt	taxable incom	e.			15			9,508.

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

Form **1040** (2023)

Form 1040 (2023)							Page 2	
Tax and	16	Tax (see instructions). Check if a	ny from Form	(s): 1 🗌 881	4 2 4972	3 🗌	16	6,186.	
Credits	17	Amount from Schedule 2, line 3					17		
	18	Add lines 16 and 17					18	6,186.	
	19	Child tax credit or credit for oth	er dependent	ts from Sched	ule 8812		19		
	20	Amount from Schedule 3, line 8					20		
	21	Add lines 19 and 20					21		
	22	Subtract line 21 from line 18. If	zero or less,	enter -0			22	6,186.	
	23	Other taxes, including self-emp	loyment tax,	from Schedule	e 2, line 21 .		23	0.	
	24	Add lines 22 and 23. This is you	r total tax				24	6,186.	
Payments	25	Federal income tax withheld fro	m:						
-	а	Form(s) W-2				25a 10	,426.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c .					250	d 10,426.	
If you have a	26	2023 estimated tax payments a	nd 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 S	chedule 8812			28			
	29	American opportunity credit fro	m Form 8863	3, line 8		29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line 1	5			31			
	32	Add lines 27, 28, 29, and 31. Th	nese are your	total other pa	ayments and ref	undable credits	32	2	
	33	Add lines 25d, 26, and 32. Thes	e are your to	tal payments			33	10,426.	
Refund	34	If line 33 is more than line 24, si	ubtract line 24	4 from line 33.	This is the amou	nt you overpaid	34	4,240.	
	35a	Amount of line 34 you want refu	unded to you	J. If Form 8888	is attached, che	ck here	. 🗌 35a	4, 240.	
Direct deposit?	b	Routing number 0 6 3 1	0 7 5	1 3	c Type: 🛛 🗙	Checking	Savings		
See instructions.	d	Account number 1 3 8 3	0 4 4	5 4 0					
	36	Amount of line 34 you want app	lied to your	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24. Th	nis is the amo	ount you owe.					
You Owe		For details on how to pay, go to	www.irs.gov	//Payments or	see instructions		37	,	
	38	Estimated tax penalty (see instr	uctions) .			38			
Third Party	Do	you want to allow another pe	erson to disc	cuss this retur	n with the IRS?	' See			
Designee	ins	tructions					omplete below		
	De nar	signee's		Phone no.		Perso	onal identificatio per (PIN)	n	
0:000		der penalties of perjury, I declare that I	have examined				. ,	st of my knowledge and	
Sign		ief, they are true, correct, and complet							
Here	Yo	ur signature		Date	Your occupation		If the IRS s	sent you an Identity	
	10			Duto				PIN, enter it here	
Joint return?					SOFTWARE	DEVELOPER	(see inst.)	inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both	ı must sign.	Date	Spouse's occupat	tion		sent your spouse an	
your records.							(see inst.)	otection PIN, enter it here	
	Dh	(012) 724 0000		Email address		100100000000000000000000000000000000000			
		one no. (813) 734-0222 parer's name Pr	eparer's signat	Email address	AISHWARYARG	1991@GMAIL.CC	PTIN	Check if:	
Paid					גשתנוס מגי				
Preparer		M PRIYA RAM SAGAR GUPTA SY		A RAM SAG	BAK GUPTA	04/15/2024	P02082703		
Use Only		m's name GLOBAL TAXE			T 00016		Phone no.	· · ·	
		n's address 245 ROONEY		NSWICK NO			Firm's EIN		
GO TO WWW.Irs.go	w/Forn	1040 for instructions and the latest ir	normation.		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 2023

Attachment Sequence No. **01** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number AISHWARYA GAIKWAD 597-45-5703

6 Farm income or (loss). Attach Schedule F 6 7 Unemployment compensation 7 8 Other income: 8a () 9 Total other income. List type and amount: 8a 9 Total other income. Add lines 8a through 8z. 9 9 Total other income. Add lines 8a through 8z. 9 10 -17, 187.	Par	t Additional Income			
2a Alimony received 2a b Date of original divorce or separation agreement (see instructions): 3 c Business income or (loss). Attach Schedule C 3 4 Other gains or (losses). Attach Schedule C 3 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 6 6 Income or (loss). Attach Schedule F 6 7 Unemployment compensation 7 8 Other income: 8a (9 Tocing named income exclusion from Form 255 8d (6 Income from Form 8869 8d (9 Total off abt 8e 1 Income from Form 8869 8i 9 Total other income on the business of renting such property 8a 1 Income from therental of personal property if you engaged in the rental for pofit but were not in the business of renting such property 8a 1 Nortaxable amount of Medical waiver payments included on Form 1940, (inclusion (see instructions) 8a 9 Total other income. List type and amount: 8a 9 Total other income. Add lines 8a through 8z. 9 9	1	Taxable refunds, credits, or offsets of state and local income taxes		1	
3 Business income or (loss). Attach Schedule C 3 4 Other gains or (losses). Attach Form 4797 4 5 Rental real estate, royatlies, partnerships, S corporations, trusts, etc. Attach Schedule E 5 -17,187. 6 Farm income or (loss). Attach Schedule F 6 7 7 Unemployment compensation 7 6 8 Net operating loss 8a 7 6 Gambling 8b 6 7 Cancellation of debt 8c 7 8 Cancellation of debt 8c 8d 9 Foreign earned income exclusion from Form 2555 8d 8d 9 Income from Form 8889 8f 8g 8f 9 Income from Form 8889 8f 8g 8f 1 Income from Form 8889 8f 8g 8i 8i 1 Income from Form 8889 8f 8g 8i	2a			2a	
3 Business income or (loss). Attach Schedule C 3 4 Other gains or (losses). Attach Form 4797 4 5 Rental real estate, royatties, partnerships, S corporations, trusts, etc. Attach Schedule E 5 -17,187. 6 Farm income or (loss). Attach Schedule F 6 7 7 Unemployment compensation 8a 7 8 Other income: 8a 7 9 Cancellation of debt 8c 7 9 Tozan from Form 8853 8a 7 9 Tozan from Form 8853 8e 8d 10 Loren from Form 8853 8e 8d 11 Income from Form 8853 8e 8d 12 Prizes and awards 8i 8i 13 Activity not engaged in for profit income 8i 14 Income from Torm 8863 8d 8d 15 Prizes and awards 8i 8d 8d 16 Income from Form 825 8d 8d 8d 17 Prizes and awards 8d 8d 8d 8d 8d	b	Date of original divorce or separation agreement (see instructions):			
4 Other gains or (losses). Attach Form 4797 4 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 5 6 Farm lincome or (loss). Attach Schedule F. 6 7 Unemployment compensation 6 8 Other income: 8a (9 Gambling 8b 1 Net operating loss 8a (6 Gambling 8a (7 Other income: 8d (9 Gambling 8a (1 Net operating loss 8d (2 Cancellation of debt 8a (3 Bab 8d (4 Income from Form 8853 8d (9 Alaska Permanent Fund dividends 8g 1 Income from Form 8889 8d 1 Alaska Permanent Fund dividends 8g 1 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 8d 1 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 is	3			3	
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6 Farm income or (loss). Attach Schedule F. 6 7 Unemployment compensation 7 8 Other income: 8a () 9 Total other income exact with the income set with the income exact with the inc	5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-17,187.
8 Other income: a Net operating loss b a Net operating loss b b b Gambling c b b c Cancellation of debt b b c d Foreign earned income exclusion from Form 2555 b b d d Income from Form 8853 b b b g Alaska Permanent Fund dividends b b b f Income from Form 8853 f b b g Alaska Permanent Fund dividends b b b f Income from Form 8889 f b b j Activity not engaged in for profit income bi b b k Stock options b b b b n Notwards set instructions) b b b b n Notaxable distributions from an ABLE account (see instructions) b b b b b s Schalarship and fellowship grants not reported on Form W-2 b b	6	Farm income or (loss). Attach Schedule F.		6	
a Net operating loss 8a (b Gambling	7	Unemployment compensation		7	
b Gambling Bb c Cancellation of debt Bc d Foreign earned income exclusion from Form 2555 Bd d Income from Form 8853 Bd g Alaska Permanent Fund dividends Bg f Income from Form 8889 Bf g Alaska Permanent Fund dividends Bg h Jury duty pay Bh i Prizes and awards Bi j Activity not engaged in for profit income Bi 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 Bi m Olympic and Paralympic medals and USOC prize money (see instructions) Bn n Section 951(a) inclusion (see instructions) Bn o Section 951(a) inclusion (see instructions) Bn s Cotholarship and fellowship grants not r	8	Other income:			
c Cancellation of debt 8c d Foreign earned income exclusion from Form 2555 8d () e 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 8i j Activity not engaged in for profit income 8k l 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 8k l Income from the rental of personal property if you engaged in the rental for profit lut were not in the business of renting such property 8k m Olympic and Paralympic medals and USOC prize money (see instructions) 8m o Section 951(a) inclusion (see instructions) 8n o Section 951(a) inclusion (see instructions) 8n g 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	а	Net operating loss	8a ()	
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d Foreign earned income exclusion from Form 2555 Bd (e Income from Form 8853 86 f Income from Form 8889 8f g Alaska Permanent Fund dividends 8g h Jury duty pay 8g j Activity not engaged in for profit income 8i j Activity not engaged in for profit income 8i j Activity not engaged in for profit income 8i i Prizes and awards 8i j Activity not engaged in for profit income 8i j Activity not engaged in for profit income 8i 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 8i m Olympic and Paralympic medals and USOC prize money (see instructions) 8m o Section 951A(a) inclusion (see instructions) 8n o Section 951A(a) inclusion (see instructions) 8a g Taxable distributions from an ABLE account (see instructions) 8a g Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d 8a u Wages earned wh	С		8c		
e 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 8i j Activity not engaged in for profit income 8i j Activity not engaged in for profit income 8i 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 8k i Income from 4Paralympic medals and USOC prize money (see instructions) 8n n Section 951(a) inclusion (see instructions) 8n o Section 951(a) inclusion (see instructions) 8n g Taxable distributions from an ABLE account (see instructions) 8a 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 8a u Wages earned while incarcerated 8a d Total other income. Add lines 8a through 8z 9 Total other income. Add lines 8a	d	Foreign earned income exclusion from Form 2555	8d ()	
g Alaska Permanent Fund dividends 8g h Jury duty pay	е	Income from Form 8853	8e		
h Jury duty pay	f		8f		
h Jury duty pay	g	Alaska Permanent Fund dividends	8g		
i Prizes and awards 8i j Activity not engaged in for profit income 8j k Stock options 8k l 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 8k m Olympic and Paralympic medals and USOC prize money (see instructions) 8n n Section 951(a) inclusion (see instructions) 8n o Section 951A(a) inclusion (see instructions) 8n g Taxable distributions from an ABLE account (see instructions) 8g g Taxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d 8t u Wages earned while incarcerated 8z g Total other income. Add lines 8a through 8z 8z g Total other income. Add lines 8a through 8z 9 10 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 -17, 187.	h		8h		
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 8k m Olympic and Paralympic medals and USOC prize money (see instructions) 8m n Section 951(a) inclusion (see instructions) 8n o Section 951A(a) inclusion (see instructions) 8n g Taxable distributions from an ABLE account (see instructions) 8g g Taxable distributions from an ABLE account (see instructions) 8r s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d 8s (u Wages earned while incarcerated 8u z Other income. List type and amount: 8z g Total other income. Add lines 8a through 8z 9 10 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 -17, 187.	i		8i		
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 instructions) 81 n Section 951(a) inclusion (see instructions) 8n o Section 951A(a) inclusion (see instructions) 80 p Section 951A(a) inclusion (see instructions) 80 p Section 461(l) excess business loss adjustment 8g q Taxable distributions from an ABLE account (see instructions) 8g r Scholarship and fellowship grants not reported 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 8u z Other income. List type and amount: 8z 9 10 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 -17, 187.	j	Activity not engaged in for profit income	8j		
for profit but were not in the business of renting such property 8 m Olympic and Paralympic medals and USOC prize money (see instructions) 8 n Section 951(a) inclusion (see instructions) 8 o Section 951A(a) inclusion (see instructions) 8 g Taxable distributions from an ABLE account (see instructions) 8 r Scholarship and fellowship grants not reported on Form W-2 8 s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d 8 u Wages earned while incarcerated 8 z Other income. List type and amount: 8 m Uwages 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 9	k	Stock options	8k		
m Olympic and Paralympic medals and USOC prize money (see instructions) 8m n Section 951(a) inclusion (see instructions) 8n o Section 951A(a) inclusion (see instructions) 8o p Section 461(l) excess business loss adjustment 8g q Taxable distributions from an ABLE account (see instructions) 8q r Scholarship and fellowship grants not reported 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 z Other income. List type and amount: 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 here and on Form 1040, 1040-SR, or 1040-NR, line 8 9	I				
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o Section 951A(a) inclusion (see instructions) 80 p Section 461(l) 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 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 here and on Form 1040, 1040-SR, or 1040-NR, line 8 9		, ,	8m		
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s Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d 8s 9 t Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan 8t 8t u Wages earned while incarcerated 8u 9 8t 8u other income. List type and amount: 8z 9 9 10 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 10 -17, 187.	q				
1040, line 1a or 1d 10 10 Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan 10	r		8r	_	
t Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan 8t u Wages earned while incarcerated 8u 8u z Other income. List type and amount: 8z 9 9 Total other income. Add lines 8a through 8z 9 9 10 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 9	S				
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u Wages earned while incarcerated 8u z Other income. List type and amount: 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 here and on Form 1040, 1040-SR, or 1040-NR, line 8 9	t				
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9 Total other income. Add lines 8a through 8z	u	•	<u>8u</u>		
9 Total other income. Add lines 8a through 8z. 9 10 Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 9	Z	Other income. List type and amount:			
10Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 810-17, 187.			8z		
1040, 1040-SR, or 1040-NR, line 8			· · · · · · · ·	9	
	10				17 107
	Ear D-				

Par	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		-	
ĸ	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)			
-			-	
2	Other adjustments. List type and amount:			
25	Total other adjustments. Add lines 24a through 24z		25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter	here and on		
20	Form 1040, 1040-SR, or 1040-NR, line 10		26	
			· · · ·	(Form 1040) 2023

SCHEDULE B (Form 1040)

Department of the Treasury Internal Revenue Service **Interest and Ordinary Dividends**

OMB No. 1545-0074

Attach to Form 1040 or 1040-SR.

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

AISHWARYA GAIKWAD 597-45-570 Part I 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address: Amount of the security number and address: (See instructions and the Instructions for Form 1040, line 2b.) ROBINHOOD SECURITIES LLC Image: Comparison of the security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's social security number and address interest first. Also, show that buyer's socia	03 ount 1,533.
Interest Interest first. Also, show that buyer's social security number and address: (See instructions and the Instructions for Form 1040, line 2b.) ROBINHOOD SECURITIES LLC Note: If you Interest first.	
and the Instructions for Form 1040, line 2b.) Note: If you	1,533.
Form 1099-INT, Image: statement from a brokerage firm, Image	
2 Add the amounts on line 1	1,533.
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815.	
4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b 4	1,533.
Note: If line 4 is over \$1,500, you must complete Part III. Amo	ount
Part II 5 List name of payer: ROBINHOOD SECURITIES LLC	197.
Ordinary	
statement from a brokerage firm, list the firm's	
payer and enter	
the ordinary dividends shown on that form. 6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b 6 Note: If line 6 is over \$1,500, you must complete Part III.	197.
Part IIIYou must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.	d a foreign
Accounts and Trusts Caution: If required, failure to Caution: If Caution: I	Yes No
If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial substantial penalties. Additionally, you	
 may be required to file ForcEN Form 114, list the name(s) of the foreign country(-ies) where the financial account(s) is (are) located: Statement of Specified Foreign Financial Assets. 8 	

foreign trust? If "Yes," you may have to file Form 3520. See instructions .

See instructions.

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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.

2023 Attachment Sequence No. 12

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

AISHWARYA GAIKWAD

Your social security number

597-45-5703

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	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F line 2, column	(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	961.	2,085.	_	60.	-1,184.
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	324	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	y, from line 8 of y	our Capital Loss	Carryover	6	()
7	 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back					

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

lines This	instructions 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)	(g) Adjustmen to gain or loss Form(s) 8949, l line 2, colum	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	0.	1,286.			-1,286.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
13 Capital gain distributions. See the instructions						
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	e e			15	-1,286.

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 -2,470.
	• 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?	
	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 (2,470.)
	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**

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.



Internal Revenue Service Name(s) shown on return

Department of the Treasury

Social security number or taxpayer identification number

AISHWARYA GAIKWAD

597-45-5703

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 acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	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) 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	961.	2,085.	E	-60.	-1,184.
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	961.	2,085.		-60.	-1,184.

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)	Atta

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side AISHWARYA GAIKWAD

Social security number or taxpayer identification number 597-45-5703

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) Date acquired	(c) Date sold or	(d) Proceeds	(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) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/23	0.	1,286.			-1,286.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	lude on your le 9 (if Box E	0.	1,286.			-1,286.	

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.

REV 03/07/24 PRO

SCHEDULE E	
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

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

Department of the Treasury

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

2023	
Attachment	

Internal	Revenue Service			Go to www.irs.gov/ScheduleE	E for ins	stru	ctions an	d the la	atest	nformation.		Seq	uence	No. 13
Name(s) shown on return										Your soc	ial secu	rity nu	mber
AISH	IWARYA GAIK	WAD									597-4	<u>5-5</u> 7	03	
Par				From Rental Real Estate										
	Note: If yo	ou are i	n th	e business of renting personal pro	operty, ι 40	use	Schedule	C . See	e instr	uctions. If you	are an ind	ividual,	report	farm
Α				nts in 2023 that would require y		file F	Form(s) 1	0992.5	See ir	structions			Yes	X No
				ou file required Form(s) 1099?										
1a				ch property (street, city, state,								<u> </u>		
						,						л т л т	111	0.4.6
A B	A 704 , PA	ARAM	JUP	NT EROS, KATRAJ - KON	NDHWA	AR	OAD KA	A.I.KAJ	, P	JNE, MAHA	RASHTR	A IN	411	046
Б С														
1b	Turne of Drone	urth (2	For each rental real estate pr	oportu	liote	ad			air Rental	Daraa		•	
D	Type of Prope (from list below		2	For each rental real estate pro above, report the number of f						Days	Perso	nai Us ays	e	QJV
Α	3	,		personal use days. Check the				Α		365		0		
B				if you meet the requirements				B						
С				qualified joint venture. See ins	structio	ons.		C						
	of Property:								1		1			
	Single Family R	esider	nce	3 Vacation/Short-Term F	Rental		5 Land		7	Self-Rental				
2	Multi-Family Re	siden	се	4 Commercial			6 Roya	alties	8	Other (desc	ribe)			
										Propert				
Incon	1 0 '					ł		Α		B	103.		C	<u> </u>
3		4				3			34.					
4						4			• - •					
Ехреі						<u> </u>								
5					Ę	5								
6	-			tructions)		6								
7				псе		7		3,1	20.					
8	•					8								
9					ę	9								
10				ional fees		0								
11	-	•				1		2,9	65.					
12				to banks, etc. (see instructions		2								
13	Other interest				1	3								
14	Repairs				1	4		4,5	62.					
15	Supplies				1	5		4,9	50.					
16	Taxes					6								
17						7		2,2	24.					
18	•	expens	e o	r depletion		8								
19	Other (list)					9								
20	•			es 5 through 19		20		17,8	21.					
21				e 3 (rents) and/or 4 (royalties).										
	· ·			structions to find out if you mu				_17 1	07					
00						21	•	-17,1	0/.					
22				state loss after limitation, if an ructions)		22 (17,18	37.)()()
23a	Total of all amo	ounts	rep	orted on line 3 for all rental pro	opertie	s			23a		634.			
b			-	orted on line 4 for all royalty p	•				23b					
С			-	orted on line 12 for all propert					230					
d			-	orted on line 18 for all propert					230					
е			•	orted on line 20 for all propert					23e	1	7,821.			
24				mounts shown on line 21. Do			•				. 24			
25	Losses. Add ro	oyalty lo	osse	es from line 21 and rental real es	state lo	sses	s from lin	e 22. E	nter t	otal losses he	re 25	(17	, 187.)

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

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2023

-17,187.

26

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Form 8995

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Department of the Treasury Internal Revenue Service

OMB No. 1545-2294 1 Attachment Sequence No. 55

Go to www.irs.gov/Form8995	for instructions and the latest information.
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Name(s) shown on return	Your taxpaye	r identifica
		E 7 A 2

AISHWARYA GAIKWAD

ation number 597-45-5703

Note. You can claim the qualified business income deduction only if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$182,100 (\$364,200 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1		(b) Taxpayer identification number		(c) Qualified business income or (loss)	
i					
ii					
iii					
iv					
v					
2	Total qualified business income or (loss). Combine lines 1i through 1v,				
	column (c)				
3	Qualified business net (loss) carryforward from the prior year)			
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-				
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5		
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)				
	(see instructions)	3.			
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior				
	year)			
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero				
	or less, enter -0	3.			
9			9	1.	
10	Qualified business income deduction before the income limitation. Add lines 5 and 9 $\$.		10	1.	
11	Taxable income before qualified business income deduction (see instructions) 11	49,509.			
12	Enter your net capital gain, if any, increased by any qualified dividends				
	(see instructions)	180.			
13	Subtract line 12 from line 11. If zero or less, enter -0	49,329.			
14	Income limitation. Multiply line 13 by 20% (0.20)	-	14	9,866.	
15					
	the applicable line of your return (see instructions)	-	15	1.	
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, er		16	(0.)	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If				
	zero, enter -0		17	(0.)	
For Pri	vacy Act and Paperwork Reduction Act Notice, see instructions. REV 03/07/24 PRO			Form 8995 (2023)	