## 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

Submission Identification Num	ber (SID)						
Taxpayer's name			Social se	curity num	ber		
ELAIYARAJA PANDIAN			402-	79-159	2		
Spouse's name			Spouse's	Spouse's social security number			
Part I Tax Return Info	rmation — Tax Year Ending D	ecember 31. 2023	(Enter year yo	u are au	thorizina.	)	
Enter whole dollars only on line		2020	(=:::::::)	<u> </u>		<i>/</i>	
	line 4 only. Leave lines 1, 2, 3, and	l 5 blank.					
				. 1	67	,676.	
				. 2		,140.	
3 Federal income tax with	held from Form(s) W-2 and Form(s)	1099		. 3		,241.	
4 Amount you want refun	* * * * * * * * * * * * * * * * * * * *			. 4		,101.	
				. 5	_	, = 0 = 1	
	ration and Signature Authoriz				our retu	rn)	
return (original or amended) I am not send my return to the IRS and to send my return to the IRS and to for any delay in processing the retadent to initiate an ACH electronic payment of my federal taxes owed authorization is to remain in full for payment, I must contact the U.S business days prior to the payment taxes to receive confidential inforpersonal identification number (PIR)	te, correct, and complete. I further decide authorizing. I consent to allow my it to receive from the IRS (a) an acknowle furn or refund, and (c) the date of any region of the funds withdrawal (direct debit) entry to do not his return and/or a payment of est porce and effect until I notify the U.S. To. Treasury Financial Agent at 1-888-3 at (settlement) date. I also authorize the function necessary to answer inquiries N) below is my signature for the income	intermediate service provider edgement of receipt or reason efund. If applicable, I authorion the financial institution accimated tax, and the financial freasury Financial Agent to 153-4537. Payment cancellate financial institutions involve and resolve issues related	r, transmitter, or el- in for rejection of to ze the U.S. Treasu ount indicated in to institution to debi- terminate the auth- tion requests must ed in the processing to the payment.	ectronic re the transminy and its the tax prep to the entry orization. The to be received of the el further ac	turn originatession, (b) the designated paration soft to this according for revoke (dived no latestronic packnowledge	tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 yment of that the	
Electronic Funds Withdrawal Cons							
Taxpayer's PIN: check one be	_			9 1 !	5 9 2		
X I authorize GLOBAL	ERO firm name	to enter or ge	enerate my PIN		digits, but	as my	
signature on the incor	me tax return (original or amended)	I am now authorizing.		don't ente	er all zeros		
	my signature on the income tax re ur own PIN and your return is filed						
Your signature ►		D	ate ► <u>2/29/2</u>	2024			
Spouse's PIN: check one box	x only						
authorize	· oy	to enter or as	enerate my PIN			as my	
	ERO firm name	to enter or ge	enerate my r mv	Enter five	digits, but	as my	
signature on the incor	me tax return (original or amended)	I am now authorizing.			er all zeros		
	my signature on the income tax re ur own PIN <b>and</b> your return is filed						
Spouse's signature ►		D	ate ▶				
	Practitioner PIN Method F	Returns Only—continue	below				
Part III Certification an	d Authentication — Practition	er PIN Method Only					
ERO's EFIN/PIN. Enter your si	ix-digit EFIN followed by your five-o	digit self-selected PIN.	2 2 2 4 Don'	9 6 0	8 2 7 eros	1	
authorized to file for tax year indi-	ntry is my PIN, which is my signature for cated above for the taxpayer(s) indicated N method and <b>Pub. 1345,</b> Handbook for	ted above. I confirm that I a	am submitting this	return in a	accordance		
ERO's signature ▶		D	ate ►				
	ERO Must Retain This						
ı	Don't Submit This Form to the						

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



OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space

For the year Jan	. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling			, 20		See se	parate ins	tructions.
Your first name	and m	iddle initial	Last na	ame						Your so	ocial securi	ity number
ELAIYARA	ΔΤΔ		PANI	OTAN						402	79   1	592
		s first name and middle initial	Last na									curity number
-										291	85 0	1357
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.			/	Apt. no.				ion Campaign
		HOLLOW DR							- 1		here if you,	
		ice. If you have a foreign address, also co	mplete	spaces below.	Sta	ite	ZIP c	ode		•	· ·	ntly, want \$3
FRISCO					TX	ζ	750	135			o this fund. Iow will not	Checking a
Foreign country	/ name			Foreign province/state/o				gn postal c			x or refund	
										•	You	Spouse
Filing Status	. [	Single				☐ Head of he	ouseh	old (HO	<del></del> -			
-		Married filing jointly (even if only o	ne had	income)		_			,			
Check only one box.	×	Married filing separately (MFS)										
0.10 20/11		you checked the MFS box, enter the	name	of your spouse. If you	u che						ild's name	e if the
		ialifying person is a child but not you										
			/						\ <i>(</i>	(1-) 11		
Digital		ny time during 2023, did you: (a) reco nange, or otherwise dispose of a digi	•				-				Yes	⊠ No
Assets		<u></u>					:(): (3		Ction	5.)		
Standard Deduction	_	neone can claim:	•	•		•						
Deduction		Spouse itemizes on a separate return	n or you	u were a duai-status	allen	1						
Age/Blindness	You	:  Were born before January 2, 1	959 [	Are blind Spo	ouse	: Was bor	rn bef	ore Janua	ary 2,	, 1959	☐ Is b	lind
Dependents	s (see	instructions):		(2) Social security	,	(3) Relationsh	nip (4	l) Check t	he bo	x if quali	ifies for (see	e instructions):
If more	(1) F	irst name Last name		number		to you		Child t	ax cre	edit	Credit for of	ther dependents
than four												
dependents, see instructions												
and check	· 											
here											<u> </u>	
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	ee instructions)						1a	ı	94,268.
Attach Form(s)	b	Household employee wages not re	eported	on Form(s) W-2 .						1b	,	
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							10	;		
attach Forms	d	Medicaid waiver payments not rep	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d	<u> </u>	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	rm 2441, line 26						1e	,	
was withheld.	f	Employer-provided adoption bene	fits fror	n Form 8839, line 29						1f	1	
If you did not	g	Wages from Form 8919, line 6 .								<b>1</b> g	,	
get a Form W-2, see	h	Other earned income (see instruction	ions)				٠, ٠			1h	1	0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		<u>li</u>				_		
	z	Add lines 1a through 1h								1z	2	94,268.
Attach Sch. B	2a	Tax-exempt interest	2a	1.60		axable interest				<b>2</b> b	)	2,256.
if required.	3a		3a	163.		Ordinary divider				3b		163.
Standard	4a		4a			axable amoun				4b	_	
Deduction for—	5a	<del>-</del>	5a			axable amoun				5b	_	
Single or Married filing	6a	,	6a			axable amoun	t		٠ ـ	6b	<u>'</u>	
separately,	С	If you elect to use the lump-sum e		· ·	•	,					4	
\$13,850 Married filing	7	Capital gain or (loss). Attach Sched				•			. L	7		-1,500.
jointly or Qualifying	8	Additional income from Schedule	-							8		27,511.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•						9		67,676.
\$27,700 • Head of	10	Adjustments to income from Sche								10		<u> </u>
household, \$20,800	11	Subtract line 10 from line 9. This is	-	-						11		<u>67,676.</u>
If you checked	12	Standard deduction or itemized		•	,					12		13,850.
any box under Standard	13	Qualified business income deducti	ion fron	n Form 8995 or Form	899	ъ-А				13		12 050
Deduction, see instructions.	14	Add lines 12 and 13								14	_	<u>13,850.</u> 53.826.
	15	Subtract line 14 from line 11. If zer	O Or IAS	is, enter -u This is v	OH IT	iaxable incom	ıe			15	a 1	71.0/b

Form 1040 (2023	3)						Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Form(	s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌	10	6 7,140.
Credits	17					1	7
	18	Add lines 16 and 17				1	7,140.
	19	Child tax credit or credit for other dependent	s from Schedi	ule 8812		19	9
	20	Amount from Schedule 3, line 8				2	0
	21	Add lines 19 and 20				2	1
	22	Subtract line 21 from line 18. If zero or less, e	enter -0			2	7,140.
	23	Other taxes, including self-employment tax, f	rom Schedule	2, line 21		2	3 0.
	24	Add lines 22 and 23. This is your <b>total tax</b>				2	
Payments	25	Federal income tax withheld from:					
	а	Form(s) W-2			<b>25a</b> 8,	241.	
	b	Form(s) 1099			25b		
	С	Other forms (see instructions)			25c		
	d	Add lines 25a through 25c				25	6d 8,241.
If you have a	26	2023 estimated tax payments and amount ap	oplied from 20	22 return		2	6
qualifying child,	27	Earned income credit (EIC)			27		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812					
	29	American opportunity credit from Form 8863					
	30	Reserved for future use			30		
	31	Amount from Schedule 3, line 15					
	32	Add lines 27, 28, 29, and 31. These are your	total other pa	ayments and refu	indable credits	3	2
	33	Add lines 25d, 26, and 32. These are your to				3	8,241.
Refund	34	If line 33 is more than line 24, subtract line 24	from line 33.			3	4 1,101.
	35a	Amount of line 34 you want refunded to you	. If Form 8888	is attached, chec	k here	. 🗌 35	ia 1,101.
Direct deposit?	b	Routing number   0   7   1   0   0   0   0			_	avings	
See instructions.	d	Account number 1 2 8 0 9 7 8					
	36	Amount of line 34 you want applied to your 2	2024 estimate	ed tax	36		
Amount	37	Subtract line 33 from line 24. This is the <b>amo</b>	unt vou owe.				
You Owe		For details on how to pay, go to www.irs.gov	3	7			
	38	Estimated tax penalty (see instructions) .			38		
Third Party	Do	you want to allow another person to disc	uss this retur	n with the IRS?	See		
Designee	ins	tructions			. Yes. Cor	mplete belov	w. 🔀 No
		signee's	Phone			nal identificati	on
	naı		no.		numbe		
Sign		der penalties of perjury, I declare that I have examined ef, they are true, correct, and complete. Declaration o					
Here		ur signature	Date	Your occupation			sent you an Identity
	10	an signature —	2/29/2024	Tour occupation			n PIN, enter it here
Joint return?		4	2/29/2024	TECHNICAL	TEST LEAD	(see inst.)	1
See instructions.	Sp	buse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupati	on		sent your spouse an
Keep a copy for your records.						Identity P	rotection PIN, enter it here
,		(520) 052 0550	- " "				
		one no. (630)863-2658	Email address	PANDIANELAIYA	ARAJA@GMAIL.COM	<u>(</u> PTIN	Check if:
Paid		parer's name Preparer's signatu		OHDER ERT.			
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA I	KAM SAGAR	GUPTA TALLAM	03/01/2024	20208270	
Use Only		n's name GLOBAL TAXES LLC		T 00016			0. (678)965-9522
		n's address 245 ROONEY CT E BRUI	NSWICK NO			Firm's Ell	
Go to www.irs.go	ov/Forn	1040 for instructions and the latest information.		BAA	REV 02/23/24 PRO		Form <b>1040</b> (2023)

## SCHEDULE 1 (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

ELAIYARAJA PANDIAN

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.

Your social security number

402-79-1592

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	-27,511.
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule E .	5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (	)	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (	)	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	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 (	4	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t	_	
u -	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	0_		
0	Total ather income. Add lines to through the	8z		
9 10	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente 1040, 1040-SR, or 1040-NR, line 8		10	-27,511.
	10 10, 10 10 01 1, 01 10 10 111 1, 111 10 0 1 1 1 1		10	- , , J ·

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:				
<b>0</b> -		24z		0-	
<b>25</b>	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b>				
	Form 1040, 1040-SR, or 1040-NR, line 10			26	
	BAA	REV 02/	23/24 PRO	Schedu	ile 1 (Form 1040) 2023

#### **SCHEDULE B** (Form 1040)

Part I

**Interest and Ordinary Dividends** 

Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

Your social security number 402-79-1592

Attachment Sequence No. **08** 

**Amount** 

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

ELAIYARAJA PANDIAN

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

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		interest first. Also, show that buyer's social security number and address:					
(See instructions		Robinhood Securities LLC			2,1	89.	
and the Instructions for		Apex Clearing				67.	
Form 1040, line 2b.)							
Note: If you							
received a							
Form 1099-INT, Form 1099-OID,			1				
or substitute statement from							
a brokerage firm,							
list the firm's name as the							
payer and enter							
the total interest shown on that							
form.							
	2	Add the amounts on line 1	2		2,2	56.	
	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989.					
	4	Attach Form 8815	3 4		2 2	56.	
		If line 4 is over \$1,500, you must complete Part III.	_	Am	ount	50.	
Part II	5	List name of payer: Robinhood Securities LLC				21.	
		Apex Clearing				42.	
Ordinary Dividends							
(See instructions and the							
Instructions for Form 1040,							
line 3b.)			5				
Note: If you							
received a Form 1099-DIV							
or substitute statement from							
a brokerage firm,							
list the firm's name as the							
payer and enter							
the ordinary dividends shown		Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6		1	63.	
on that form.	Note:	If line 6 is over \$1,500, you must complete Part III.					
Part III		nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary d			d a fo	oreign	
Foreign	accou	nt; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign	trust				
Accounts					Yes	No	
and Trusts	7a	At any time during 2023, did you have a financial interest in or signature authority of	over a	financial			
Caution: If	_	account (such as a bank account, securities account, or brokerage account) locate		a foreign			
required, failure to file FinCEN Form	J	country? See instructions				×	
114 may result in substantial		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority?					
penalties.		and its instructions for filing requirements and exceptions to those requirements.					
Additionally, you may be required	b	If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the					
to file Form 8938,		financial account(s) is (are) located:	,				
Statement of Specified Foreign							
Financial Assets. See instructions.	8	During 2023, did you receive a distribution from, or were you the grantor of, or t					
OCC IIIOII UCIIOIIS.		foreign trust? If "Yes," you may have to file Form 3520. See instructions				×	

# SCHEDULE C (Form 1040)

# Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065. Go to www.irs.gov/ScheduleC for instructions and the latest information.

Attachment Sequence No. **09** 

	Name of proprietor					Social security number (SSN) 402-79-1592					
A	IYARAJA PANDIAN  Principal business or profession	n incl	uding product or convice (co	a inctri	uctions)		er code from instructions				
^	SOFTWARE SERVICES	, IIICI	daing product or service (se	o ii iotil	actions)		5 1 9 2 0 0				
С	Business name. If no separate	huein	ess name leave blank								
•	SOFTWARE SERVICES	DUSIII	oss hame, leave blank.			רו Emb	ployer ID number (EIN) (see instr.)				
E	Business address (including su	uita or	room no.) 11162 ST	ידד.ד.	HOLLOW DR						
-	City, town or post office, state										
F	Accounting method: (1)										
G				durina	Other (specify)	mit on l	neses X Yes No				
Н											
ï			-		n(s) 1099? See instructions						
J											
Part		roqui	10010111(0) 1000								
1 2	Form W-2 and the "Statutory of Returns and allowances	employ 	yee" box on that form was c	hecked 	this income was reported to you on	1 2					
3											
4	•	,									
5 6	•				refund (see instructions)						
7			-		,						
Part	Fynenses Enter ex	nense	es for business use of yo	ur ho							
8	Advertising	8	,5 101 Business use of ye	18	Office expense (see instructions)	18					
	-	-		19	Pension and profit-sharing plans						
9	Car and truck expenses (see instructions)	9	11,866.	20	Rent or lease (see instructions):	19					
10	Commissions and fees .	10	11,000.	a	Vehicles, machinery, and equipment	20a					
11	Contract labor (see instructions)	11		b	Other business property		12,200.				
12	Depletion	12		21	Repairs and maintenance		22/2001				
13	Depreciation and section 179			22	Supplies (not included in Part III)						
	expense deduction (not			23	Taxes and licenses						
	included in Part III) (see instructions)	13		24	Travel and meals:						
14	Employee benefit programs			а	Travel	24a					
• •	(other than on line 19) .	14		b	Deductible meals (see instructions)	24b	2,400.				
15	Insurance (other than health)	15		25	Utilities	25	1,045.				
16	Interest (see instructions):			26	Wages (less employment credits)	26					
а	Mortgage (paid to banks, etc.)	16a		27a	Other expenses (from line 48) .	27a					
b	Other	16b		b	Energy efficient commercial bldgs						
17	Legal and professional services	17			deduction (attach Form 7205)	27b					
28	Total expenses before expen	ses fo	r business use of home. Add	l lines 8	3 through 27b	28	27,511.				
29	Tentative profit or (loss). Subtr	act lin	e 28 from line 7			29	-27,511.				
30	unless using the simplified me Simplified method filers only	thod. : Ente	See instructions. r the total square footage of	·							
	and (b) the part of your home				. Use the Simplified	-					
24			•	er on l	ine 30	30					
31	Net profit or (loss). Subtract				1. 25 11 2 11						
	If a profit, enter on both <b>Sch</b> checked the box on line 1, see	e instru	• • • • • • • • • • • • • • • • • • • •			31	-27,511.				
20	• If a loss, you <b>must</b> go to line		it dooriboo varis invoctina and	in thi-	activity. See instructions						
32	<ul> <li>If you have a loss, check the b</li> <li>If you checked 32a, enter the SE, line 2. (If you checked the Form 1041, line 3.</li> <li>If you checked 32b, you mu</li> </ul>	e loss box or	on both <b>Schedule 1 (Form</b> on line 1, see the line 31 instruc	1 <b>040),</b> I	line 3, and on Schedule Estates and trusts, enter on	32a 32b	<ul><li>All investment is at risk.</li><li>Some investment is not at risk.</li></ul>				

BAA

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

Part	Cost of Goods Sold (see instructions)			
33	Method(s) used to			
	value closing inventory: a $\square$ Cost b $\square$ Lower of cost or market c $\square$ Other (atta		planation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor If "Yes," attach explanation		. Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		
Part	are not required to file Form 4562 for this business. See the instructions for line 1 Form 4562.	3 to	find out if you	must file
	See Additiona	l Ve	hicle Inform	mation
43	When did you place your vehicle in service for business purposes? (month/day/year)			
44	Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle during 2023, enter the number of miles you were your vehicle during 2023, enter the number of miles you were your vehicle during 2024, enter the number of miles you were your vehicle during 2024, enter the number of miles you	ehicle/	e for:	
а	Business b Commuting (see instructions) c C	ther		
45	Was your vehicle available for personal use during off-duty hours?		Yes	☐ No
46	Do you (or your spouse) have another vehicle available for personal use?		Yes	☐ No
47a	Do you have evidence to support your deduction?		Yes	☐ No
b	If "Yes," is the evidence written?		Yes	☐ No
Part	Other Expenses. List below business expenses not included on lines 8–26, line	27b,	or line 30.	
48	Total other expenses. Enter here and on line 27a	48		

#### 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.

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

OMB No. 1545-0074

2023

Attachment Sequence No. **12** 

Department of the Treasury Internal Revenue Service

Name(s) shown on return

lame(s) shown on return

ELAIYARAJA PANDIAN

Your social security number

402-79-1592

If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I 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 172,276. 186,006. 9,690. -4,040. Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . 429. 329. 100. 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 7 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 -3,940.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 48,978. 6,840. 5,263. -36,875. 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)

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

-36,875.

11

12

13

14

15

Schedule D (Form 1040) 2023 Page 2

### Part III **Summary** -40,815. 16 Combine lines 7 and 15 and enter the result 16 • 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. □ 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 1,500.) • (\$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
ELAIYARAJA PANDIAN

Social security number or taxpayer identification number

402-79-1592

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☐ (C) Short-term transactions☐				sis <b>wasn't</b> report	ed to the IF	RS	,		
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> 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.		If you enter an amount in column (g), enter a code in column (f).  See the separate instructions.		
(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	<b>(g)</b> Amount of adjustment			
Robinhood Securities LLC	01/01/23	12/31/23	78,789.	86,669.	W	2,775.	-5,105.		
Apex Clearing	01/01/23	12/31/23	93,487.	99,337.	W	6,915.	1,065.		
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 6).	al here and inc is checked), <b>li</b>	clude on your ne 2 (if Box B	172.276.	186.006.		9.690.	-4.040.		

**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 **2** 

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

Social security number or taxpayer identification number 402-79-1592

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.

<ul><li>✗ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on	Form(s) 1099	)-B showing bas	•		•	•)
(a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> below	Adjustment, i If you enter an enter a c See the sep	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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/22	12/31/23	6,840.	48,978.	W	5,263.	-36,875.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 8b (if Box D above	al here and inc	lude on your					

**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.

above is checked), or line 10 (if Box F above is checked) .

5,263.

6,840.

48,978.

**Sales and Other Dispositions of Capital Assets** 

Department of the Treasury Internal Revenue Service

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.

Attachment Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return	Social security number or taxpayer identification number					
ELAIYARAJA PANDIAN	402-79-1592					

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 Part I 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

(a) Description of property	(b) Date acquired	(c) Date sold or disposed of (Mo., day, yr.)	Proceeds S	(e) Cost or other basis See the <b>Note</b> below	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss) Subtract column (e	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)			and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Crypto LLC	01/01/23	12/31/23	429.	329.			100.
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 (	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	429.	329.			100.

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.

ELAIYARAJA PANDIAN 402-79-1592 1

## **Additional Information From 2023 Federal Tax Return**

# Schedule C (SOFTWARE SERVICES): Profit or Loss from Business Line 20b

#### **Itemization Statement**

Description	Amount
RENTAL EXPENSES	12,200.
Total	12,200.

## Schedule C (SOFTWARE SERVICES): Profit or Loss from Business

Line 25 Itemization Statement

Description	Amount
INTERNET BILL	482.
ELECTRICITY BILL	563.
Total	1,045.

# Schedule C (SOFTWARE SERVICES): Profit or Loss from Business Additional Vehicle Info

#### **Continuation Statement**

Date Placed in Service	Business Miles	Commuting Miles	Other Miles	Available for Off Duty Hours?	Other Vehicle Available?	Evidence to Support Dedn?
06/14/2020	6,879	1,003	5,200	Yes	Yes	No
05/17/2021	11,237	7,362	922	Yes	Yes	No