# 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

internal nevertue service							
Submission Identification Number (SID)							
Taxpayer's name	Social sec	urity numb	 per				
AMITH YADAV JOLAM	057-1	057-13-5043					
Spouse's name	Spouse's	social secu	urity numbe	r			
Part I Tax Return Information — Tax Year Ending December 31, 202	2. (Enter year year	ı oro ou	thorizina	. \			
Enter whole dollars only on lines 1 through 5.	23 (Enter year you	i are au	litorizirig	i-)			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
<b>1</b> Adjusted gross income		1	14	4,575.			
2 Total tax				74.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1	1,108.			
4 Amount you want refunded to you		4	1	1,034.			
5 Amount you owe		5					
Part II Taxpayer Declaration and Signature Authorization (Be sure you	get and keep a co	ppy of y	our retu	ırn)			
return (original or amended) I am now authorizing. I consent to allow my intermediate service provice to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reafor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorage to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution apayment of my federal taxes owed on this return and/or a payment of estimated tax, and the finance authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cance business days prior to the payment (settlement) date. I also authorize the financial institutions invo taxes to receive confidential information necessary to answer inquiries and resolve issues relate personal identification number (PIN) below is my signature for the income tax return (original or am Electronic Funds Withdrawal Consent.	son for rejection of the prize the U.S. Treasun count indicated in the ial institution to debit to terminate the author llation requests must lived in the processing to the payment. It	e transmis / and its of e tax prepose the entry the rization. The be received of the election	ssion, (b) to designated paration so to this according for revoke wed no lat ectronic paragraphics	the reason of Financial oftware for count. This (cancel) a ter than 2 ayment of e that the			
Taxpayer's PIN: check one box only	Г		$\neg \neg$	1			
	generate my PIN	3 5 0	0 4 3	as my			
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	•		digits, but er all zeros	aomy			
I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN <b>and</b> your return is filed using the Practitioner below.							
Your signature ►	Date ►						
Spouse's PIN: check one box only							
	generate my PIN			ac my			
ERO firm name		Enter five	digits, but	as my			
signature on the income tax return (original or amended) I am now authorizing.			r all zeros				
I will enter my PIN as my signature on the income tax return (original or amendatify you are entering your own PIN <b>and</b> your return is filed using the Practitioner below.							
Spouse's signature ▶	Date ►						
Practitioner PIN Method Returns Only—continu	ie pelow						
Part III Certification and Authentication — Practitioner PIN Method Only	,						
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2 4 9	6 0	8 2 7	7   1			
		enter all ze	-				
I certify that the above numeric entry is my PIN, which is my signature for the electronic individua authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Pro	I am submitting this r	eturn in a	accordance				
ERO's signature ▶	Date ►						
ERO Must Retain This Form — See Instruc	ctions						
Don't Submit This Form to the IRS Unless Reques							

# Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Jan	ı. 1–D	ec. 31, 2023, or other tax year beginn	ing	, 2023	, ending		20	.	See separate instructions.
Your first name	first name and middle initial			Last name				dent	ifying number
							(see instructions)		
AMITH YAD	DAV		JOLA	M			057	-13	-5043
Home address (	numk	per and street). If you have a P.O. box	, see ins	tructions.					Apt. no.
6736 VERD	E								367
City, town, or po	ost of	fice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIF	code code
IRVING						TX		75	039
Foreign country	nam	e	Foreigr	n province/state/county		Foreign	postal co	ode	
Filing	×	ПБ	state	☐ Trust					
Status		Single		, _ ,	ing surviving spouse	, ,		Jiaio	nust
Check only		you officered the QOO BOX, officer the C	,, iii d	arrio ir ario quamying por	oon to a orma bac not	your dop	oridorit.		
one box.								-	
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f							
D	Otile	Twise dispose of a digital asset (of a f	ii iai iciai	linerest in a digital asse					ualifies for (see inst.):
<b>Dependents</b> (see instructions):				(2) Dependent's		İ			Credit for other
(see instructions).		(1) First name Last name		identifying number	(3) Relationship to yo	ou Ch	ld tax cre	ait	dependents
lf									
If more than four dependents, see									
instructions and									
check here									
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)			. 18	3	14,500.
Effectively	b	Household employee wages not rep		` '			. 1k	)	
Connected	С	Tip income not reported on line 1a (s		,			. 10	;	
With U.S.	d	Medicaid waiver payments not report		( )	,		. 10	t	
Trade or	е	Taxable dependent care benefits fro		·			. 16		
Business	f	Employer-provided adoption benefit		·			. 11		
Attach	g	Wages from Form 8919, line 6	. 10						
Form(s) W-2,	h	Other earned income (see instruction	. 11	1					
1042-S, SSA-1042-S,	i :	Reserved for future use	-						
RRB-1042-S,	J	Reserved for future use					. 1		
and 8288-A	k	Total income exempt by a treaty from		,					
here. Also attach	z	line 1(e)			1k		. 12		14,500.
Form(s)	2a	Tax-exempt interest 2a	- 1		xable interest		. 2k		11,500.
1099-R if tax was	2a 3a	Qualified dividends 3a			dinary dividends .		. 3k	_	
withheld.	4a	IRA distributions 4a			xable amount				
If you did not	5a	Pensions and annuities 5a			xable amount				
get a Form	6	Reserved for future use							
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu			75.				
	8	Additional income from Schedule 1 (							
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effectively	connected income		. 9		14,575.
	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income							,	
	11	Subtract line 10 from line 9. This is y							14,575.
	12	Itemized deductions (from Schedu deduction (see instructions)	le A (Fo	rm 1040-NR)) or, for ce	rtain residents of Ind	ia, stand	ard	,	13,850.
	13a	Qualified business income deduction			1 1		14		
	b	Exemptions for estates and trusts or							
	c	Add lines 13a and 13b	•	,			. 13	С	
	14								13,850.
	15	Subtract line 14 from line 11. If zero							725.

Form 1040-NR (	2023)									Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from	n Form(s): <b>1</b> 88	14 <b>2</b> [	4972	3			16	74.
Credits	17	Amount from Schedule 2 (Form 1040),	line 3						17	0.
	18	Add lines 16 and 17							18	74.
	19	Child tax credit or credit for other depe	endents from Schedu	ıle 8812 (Fo	orm 1040	) .			19	
	20	Amount from Schedule 3 (Form 1040),	line 8						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If zero or	less, enter -0						22	74.
	23a	Tax on income not effectively connected Schedule NEC (Form 1040-NR), line 15			<b>I</b>	23a				
	b	Other taxes, including self-employmer line 21	,	•	′′	23b				
	С	Transportation tax (see instructions)			. 2	23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is your total							24	74.
Payments	25	Federal income tax withheld from:								
,	а	Form(s) W-2			.   2	25a		1,108.		
	b	Form(s) 1099			. 2	25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c							25d	1,108.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments and amo	ount applied from 20	22 return .					26	_
	27	Reserved for future use				27				
	28	Additional child tax credit from Schedu	ule 8812 (Form 1040)			28				
	29	Credit for amount paid with Form 1040	)-C			29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Form 1040),	line 15			31				
	32	Add lines 28, 29, and 31. These are yo	ur <b>total other paym</b>	ents and re	efundab	le cred	lits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 3	32. These are your <b>to</b>	tal paymer	nts .				33	1,108.
Refund	34	If line 33 is more than line 24, subtract	line 24 from line 33.	This is the	amount :	you <b>ov</b>	erpaid		34	1,034.
	35a	a Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here						35a	1,034.	
Direct deposit?	b									
See instructions.	d	Account number 4 8 8 1 0 7 0 3 9 9 9 4								
	е	If you want your refund check mailed	to an address outsid	e the Unite	d States	not sh	own on	page 1,		
		enter it here.								
	36	Amount of line 34 you want applied to	your 2024 estimate	ed tax .		36				
Amount	37	Subtract line 33 from line 24. This is the	e amount you owe.							
You Owe		For details on how to pay, go to www.	irs.gov/Payments or	see instruct	tions .				37	
	38	Estimated tax penalty (see instructions	s)			38				
Third	Do yo	u want to allow another person to discu	iss this return with th	e IRS? See	instruct	ions.	∐ Ye	<b>es.</b> Compl	ete bel	ow. 🗵 No
Party Designee	Desig name	nee's 	Phone no.					nal identifi er (PIN)	cation	
		penalties of perjury, I declare that I have exar they are true, correct, and complete. Declara								
Sign	Your	signature	Date	Your occu	pation			If the	RS s	ent you an Identity
Here				SOFTWARE ENGINEER			ER		ection   inst.)	PIN, enter it here
	Phone	e no.	Email address							
Paid	Prepa	rer's name Prep	arer's signature		] [	Date		PTIN		Check if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM	I PRIYA RAM SAGAR	GUPTA TA	ALLAM (	03/02	/2024	P02082	2703	Self-employed
Preparer		name GLOBAL TAXES LLC			'			Phone n		78)965-9522
Use Only	Only								4-3171965	

BAA

#### **SCHEDULE NEC** (Form 1040-NR)

## Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

Name shown on Form 1040-NR Your identifying number AMITH YADAV JOLAM 057-13-5043 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income		(a) 10%	4) 450/	( ) 222/	(d) Other (specify)			
	Nature of Income		(a) 10%	<b>(b)</b> 15%	(c) 30%	%	%	
1	Dividends and dividend equivalents:							
а	Dividends paid by U.S. corporations	1a						
b	Dividends paid by foreign corporations	1b						
С	Dividend equivalent payments received with respect to section 871(m) transactions							
2	Interest:							
а	Mortgage	2a						
b	Paid by foreign corporations	2b						
С	Other	2c						
3	Industrial royalties (patents, trademarks, etc.)	3						
4	Motion picture or TV copyright royalties	4						
5	Other royalties (copyrights, recording, publishing, etc.)	5						
6	Real property income and natural resources royalties	6						
7	Pensions and annuities	7						
8	Social security benefits	8						
9	Capital gain from line 18 below	9						
10	Gambling—Residents of Canada only. Enter net income in column (c).  If zero or less, enter -0							
•								
a b	Winnings            Losses	10c						
11	Gambling—Residents of countries other than Canada.	100						
•••	Note: Enter winnings only. Losses aren't allowed	11						
12	Other (specify):							
		12						
13	Add lines 1a through 12 in columns (a) through (d)	13						
14	Multiply line 13 by rate of tax at top of each column	14						
15	Tax on income not effectively connected with a U.S. trade or business. Add column					-NR, line 23a <b>15</b>		
	Capital Gains and Losses	From	Sales or Excha	nges of Proper	ty			
losses f exchang within the	nly the capital gains and rom property sales or ges that are from sources he United States and not (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)  (b) Date acc mm/dd/yr		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).	
	ely connected with a U.S. s. Do not include a gain							
or loss	on disposing of a U.S. real y interest; report these							
gains ai	nd losses on Schedule D							
(Form 1	040). property sales or							
exchan	ges that are effectively							
on Sche						<u>( )</u>		
Form 4	18 Capital gain. Combine columns (f) and (g) of line 1	7. Ente	er the net gain here	and on line 9 abo	ove. If a loss, ente	r -0 <b>18</b>		

#### **SCHEDULE OI** (Form 1040-NR)

**Other Information** 

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information. Answer all questions.

OMB No. 1545-0074 Attachment Sequence No. **7C** 

Department of the Treasury Internal Revenue Service

Name :	shown on Form 1040-NR			Your identifying number								
AMI	TH YADAV JOLAM			057-13-5043								
Α	Of what country or countries were you a citizen or natio	nal during the tax y	ear? INDIA									
В	In what country did you claim residence for tax purpos	es during the tax ye	ear? United States									
С	Have you ever applied to be a green card holder (lawful	permanent residen	t) of the United States? .	□ Yes 🗵 I	No							
D	Were you ever:											
	A U.S. citizen?											
2.	A green card holder (lawful permanent resident) of the L			🗌 Yes 🔀	No							
_	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4	•										
E	If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax year.  F1											
F	Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status?											
G												
	Note: If you're a resident of Canada or Mexico AND co											
	check the box for Canada or Mexico and skip to item			☐ Mexico								
	Date entered United States mm/dd/yy Date departed United States mm/dd/yy	ates	Date entered United State mm/dd/yy	s Date departed United Sta mm/dd/yy	I							
Н	Give number of days (including vacation, nonworkdays, a		•	•								
	2021 , 2022	, and	365	 .....	NI.							
I	Did you file a U.S. income tax return for any prior year? If "Yes," give the latest year and form number you filed:			Yes ⊠ l	NO							
J	Are you filing a return for a trust?			∟ Yes 🗵 l	No							
	If "Yes," did the trust have a U.S. or foreign owner und											
	U.S. person, or receive a contribution from a U.S. perso											
K	Did you receive total compensation of \$250,000 or more	-										
	If "Yes," did you use an alternative method to determine		-									
L	Income Exempt From Tax—If you are claiming exempt complete (1) through (3) below. See Pub. 901 for more it	nformation on tax t	reaties.									
1.	Enter the name of the country, the applicable tax treaty a			claimed the treaty benefit, and	d the							
	amount of exempt income in the columns below. Attach	-		(84 ) (								
	(a) Country	(b) Tax treaty arti	cle (c) Number of month claimed in prior tax ye		ar							
			olamica in prior tax ye	aro moomo m ourront tax you								
	(e) Total. Enter this amount on Form 1040-NR, line 1k.	Do not enter it any	vhere else on line 1									
2.	Were you subject to tax in a foreign country on any of the	ne income shown in	1(d) above?	Yes	No							
3.	Are you claiming treaty benefits pursuant to a Compete	nt Authority determ	ination?	🗌 Yes 🔀	No							
	If "Yes," attach a copy of the Competent Authority dete	rmination letter to y	our return.									
М	Check the applicable box if:											
1.	This is the first year you are making an election to treat				cted							
	with a U.S. trade or business under section 871(d). See				Ш							
2.	You have made an election in a previous year that ha				nited							
	States as effectively connected with a U.S. trade or bus			·	<u> Ц</u>							
or Pa	aperwork Reduction Act Notice, see the Instructions for F	orm 1040-NR.	RAA REV 02/22/24 PRO	Schedule OI (Form 1040-NR)	2023							

# SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

## **Capital Gains and Losses**

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

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

OMB No. 1545-0074

2023

Attachment Sequence No. **12** 

	s) shown on return					ecurity number
	ITH YADAV JOLAM				-13-	5043
_	ou dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additional	_	-	_		
Pai	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines	nstructions for how to figure the amounts to enter on the below.	<b>(d)</b> Proceeds	<b>(e)</b> Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	This form may be easier to complete if you round off cents to vhole dollars.  (sales price)  (or other basis)  Form(s) 8949, Pline 2, column					
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					
1b	on Form 8949, leave this line blank and go to line 1b.  Totals for all transactions reported on Form(s) 8949 with					
	<b>Box A</b> checked	433.	358.			75.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	324	4	
	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	y, from line 8 of y	our <b>Capital Loss</b>	Carryover	6	
7	Net short-term capital gain or (loss). Combine lines 1a					
	term capital gains or losses, go to Part II below. Otherwise	e, go to Part III on	the back		7	75.
Par	t II Long-Term Capital Gains and Losses—Ger	nerally Assets F	leld More Than	One Year	(see i	instructions)
See i lines	nstructions for how to figure the amounts to enter on the below.	(d)	(e)	(g) Adjustmen		(h) Gain or (loss) Subtract column (e)
	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, line 2, colum	Part II,	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					
8b	on Form 8949, leave this line blank and go to line 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 <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	•	-	-	14	( )
15	Net long-term capital gain or (loss). Combine lines 8a	through 14 in co	lumn (h). Then, go	to Part III		

Schedule D (Form 1040) 2023 Page 2

### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 75. • 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 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . . . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified 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. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

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.

OMB No. 1545-0074 Attachment

Sequence No. 12A

Name(s) shown on return AMITH YADAV JOLAM Social security number or taxpayer identification number 057-13-5043

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.

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

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions	not reported	to you on F	orm 1099-B				
1 (a)	escription of property  Date acquired disposed of	Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	Adjustment, i If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)		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	01/01/23	12/31/23	433.	358.			75.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above should be proposed) or line 2 (if Box A)	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	422	359			75

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.