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 Number (SID)	
Taxpayer's name	Social security number
ABHIJEET SHINDE	137-45-2071
Spouse's name	Spouse's social security number
SONALI VITHALDAS SHENOY	676-81-3868
Part I Tax Return Information — Tax Year Ending December 3	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	
2 Total tax	·
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	5
Part II Taxpayer Declaration and Signature Authorization (Be so Under penalties of perjury, I declare that I have examined a copy of the income tax returns.)	
my knowledge and belief, it is true, correct, and complete. I further declare that the return (original or amended) I am now authorizing. I consent to allow my intermediate s to send my return to the IRS and to receive from the IRS (a) an acknowledgement of refor any delay in processing the return or refund, and (c) the date of any refund. If applie Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial payment of my federal taxes owed on this return and/or a payment of estimated tax, an authorization is to remain in full force and effect until I notify the U.S. Treasury Finanpayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Pay business days prior to the payment (settlement) date. I also authorize the financial inst taxes to receive confidential information necessary to answer inquiries and resolve it personal identification number (PIN) below is my signature for the income tax return (o Electronic Funds Withdrawal Consent.	ervice provider, transmitter, or electronic return originator (ERO) eccipt or reason for rejection of the transmission, (b) the reason cable, I authorize the U.S. Treasury and its designated Financial institution account indicated in the tax preparation software for ad the financial institution to debit the entry to this account. This cial Agent to terminate the authorization. To revoke (cancel) a rment cancellation requests must be received no later than 2 itutions involved in the processing of the electronic payment of issues related to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
	to enter or generate my PIN 5 2 0 7 1 as my
ERO firm name signature on the income tax return (original or amended) I am now au	enter five digits, but don't enter all zeros
,	
I will enter my PIN as my signature on the income tax return (original if you are entering your own PIN and your return is filed using the P below.	
Your signature ▶	Date ▶
Spouse's PIN: check one box only	
	to enter or generate my PIN 1 3 8 6 8 as my
ERO firm name signature on the income tax return (original or amended) I am now au	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax return (original).	_
if you are entering your own PIN and your return is filed using the P below.	
Spouse's signature ▶	Date ►
Practitioner PIN Method Returns Only	y—continue below
Part III Certification and Authentication — Practitioner PIN Met	thod Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-sele	ected PIN. 2 2 2 4 9 6 0 8 2 7 1 Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electror authorized to file for tax year indicated above for the taxpayer(s) indicated above. I crequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized I	confirm that I am submitting this return in accordance with the
ERO's signature ▶	Date▶
ERO Must Retain This Form — S	

Don't Submit This Form to the IRS Unless Requested To Do So

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

1040		artment of the Treasury-Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	ple in this s	space.
For the year Jan	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See ser	oarate i	nstructio	ons.
Your first name	and m	iddle initial	Last nar	me							Your so	cial sec	urity num	nber
ABHIJEET	Г		SHIN	DE							137	45	2071	
		s first name and middle initial	Last nar								Spouse'		security i	number
SONALI V	/ITH	ALDAS	SHEN	OY							676	81	3868	
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				A	Apt. no.				ction Ca	mpaign
3700 BEA	ACON	AVE						2	202				ou, or you	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces bel	ow.	Sta	te	ZIP c	ode			0.	jointly, wa nd. Check	-
FREMONT						CA	7	945	38		•		not chang	•
Foreign country	y name		F	oreign pr	ovince/state/	count	У	Foreiç	ın postal c	ode	your tax	or refu		Spouse
Filing Status	, <u> </u>	Single	I				Head of he	ouseh	old (HOH	— ∃)				
Check only	$\overline{\mathbf{X}}$	Married filing jointly (even if only o	ne had ii	ncome)					,	•				
one box.		Married filing separately (MFS)					☐ Qualifying	survi	ing spo	use (0	QSS)			
	If y	ou checked the MFS box, enter the	name o	of your sp	oouse. If you	ı che	ecked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the)
	qu	alifying person is a child but not you	ır depen	dent:										
Digital	Δt ar	ny time during 2023, did you: (a) rece	eive (as	a reward	l award or	navr	nent for prope	rty or	services). or (h) sell			
Assets		nange, or otherwise dispose of a digi											es 🛛 I	No
Standard		neone can claim: You as a de					a dependent				,			
Deduction		Spouse itemizes on a separate retur	•											
A are /Discolus a a										0	1050		la lia al	
	-	: Were born before January 2, 1	959 _	_ Are bli □	•	ouse		14					s blind	
Dependents		instructions): irst name Last name		(2) S	Social security number	'	(3) Relationsh to you	nip (4	Child t				see instru r other dep	
If more than four	(1)	Last Harrie			Tidifibei		to you		01		Juli	Orodit 10		
dependents,													-	
see instructions	s —									<u> </u>			一一	
and check here]												一	
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instruc	tions) .						1a		114,0)55.
	b	Household employee wages not re	•		,						1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	•								1c			
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) W-2 (see ii	nstru	ctions)				1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom For	m 2441,	line 26						1e			
was withheld.	f	Employer-provided adoption bene	fits from	Form 8	839, line 29						1f			
If you did not	g	Wages from Form 8919, line 6 .									1g			
get a Form W-2, see	h	Other earned income (see instruction	ions) .								1h			0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)			1i							
	z	Add lines 1a through 1h									1z		114,0)55.
Attach Sch. B	2a	Tax-exempt interest	2a			b T	axable interest	t.			2b			
if required.	3a	Qualified dividends	3a			b 0	rdinary divide	nds .			3b			9.
Standard)	4a	IRA distributions	4a				axable amoun				4b			
Standard Deduction for—	5a	Pensions and annuities	5a				axable amoun				5b			
Single or Married filing	6a	,	6a				axable amoun	t			6b			
separately,	С	If you elect to use the lump-sum e		-		•	,						_	
\$13,850 Married filing	7	Capital gain or (loss). Attach Scheo		•	•					. L	7			000.
jointly or Qualifying	8	Additional income from Schedule	-								8		-13,7	
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-							9		97,3	355.
\$27,700 • Head of	10	Adjustments to income from Sche									10			
household, \$20,800	11	Subtract line 10 from line 9. This is	-	-	_						11			355.
If you checked	12	Standard deduction or itemized				,					12		27,7	700.
any box under Standard	13	Qualified business income deducti									13		07.5	700
Deduction, see instructions.	14 15	Add lines 12 and 13									14		69 6	700.

Form 1040 (202)	3)								Page Z
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	7,921.
Credits	17	Amount from Schedule 2, lin	ne 3					17	
	18	Add lines 16 and 17						18	7,921.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ne 8					20	2,000.
	21	Add lines 19 and 20						21	2,000.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	5,921.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	5,921.
Payments	25	Federal income tax withheld	from:						
•	а	Form(s) W-2				25a 1	4,340).	
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	14,340.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20)22 return			26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	14,340.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	8,419.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	k here	[35a	8,419.
Direct deposit?	b	Routing number 1 1 1			c Type: 🛛	Checking [] Saving	s	
See instructions.	d	Account number 6 6 1	4 9 8 7	1 2 8					
	36	Amount of line 34 you want a	applied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe					
You Owe		For details on how to pay, g	_	-				37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party		you want to allow another	•			_			
Designee							•	e below.	⊠ No
		esignee's me		Phone no.			rsonal ide mber (PIN	ntification	
Sign	Un	der penalties of perjury, I declare the	nat I have examined	d this return and	accompanying sched	dules and stateme	nts, and t	to the best	of my knowledge and
Here	be	lief, they are true, correct, and com	plete. Declaration of	of preparer (othe	r than taxpayer) is ba	sed on all informa	tion of wh	nich prepar	er has any knowledge.
Here	Yo	ur signature		Date	Your occupation				nt you an Identity
							1	rotection P ee inst.)	PIN, enter it here
Joint return? See instructions.		accessor alamateura. If a laint vatuum I	a a 41a may na ta ai ama	Dete	SOFTWARE E		`		mt
Keep a copy for		ouse's signature. If a joint return, I	ootn must sign.	Date	Spouse's occupati	on			nt your spouse an ection PIN, enter it here
your records.						ee inst.)			
	Ph	one no. (979)985-836	0	Email address	ABHIJEETSHIN	DE27@GMAIL.	COM		
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/09/2024	P020	82703	Self-employed
Preparer	Fir	m's name GLOBAL TA	XES LLC				PI	none no. ((678)965-9522
Use Only	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Fi	rm's EIN	84-3171965
<u> </u>	-/-	4040 (;) ;	11.6						- 1010

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

ABHI	JEET SHINDE & SONALI VITHALDAS SHENOY		137-4	5-20'	71
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes			1	
2a	Alimony received		[2a	
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C			3	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att			5	-13,709.
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
а	Net operating loss	8a ()		
b	Gambling	8b			
С	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e			
f	Income from Form 8889	8f			
g	Alaska Permanent Fund dividends	8g			
h	Jury duty pay	8h			
i	Prizes and awards	8i			
j	Activity not engaged in for profit income	8j			
k	Stock options	8k			
ı	Income from the rental of personal property if you engaged in the rental				
	for profit but were not in the business of renting such property	81			
m	Olympic and Paralympic medals and USOC prize money (see				
	instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
0	Section 951A(a) inclusion (see instructions)	80			
р	Section 461(I) excess business loss adjustment	8p			
q	Taxable distributions from an ABLE account (see instructions)	8q			
r	Scholarship and fellowship grants not reported on Form W-2	8r			
S	Nontaxable amount of Medicaid waiver payments included on Form				
	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or				
	a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
Z	Other income. List type and amount:				
		8z			
9	Total other income. Add lines 8a through 8z			9	
10	Combine lines 1 through 7 and 9. This is your additional income. Ente	r here and o	n Form		

10

-13,709.

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee				
	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)	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:				
0E	Total ather adjustments Add lines 04s through 04s	24z			
25 06	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	nere and on	06	
				26	I- 4 (F 4040) 2222
	BAA	REV 03/	04/24 PRO	ocnedu	le 1 (Form 1040) 2023

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

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. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

ABHIJEET SHINDE & SONALI VITHALDAS SHENOY

Your social security number 137-45-2071

Par	Nonrefundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		. 1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441	, line 11. Atta 	ch 2	
3	Education credits from Form 8863, line 19		. 3	2,000.
4	Retirement savings contributions credit. Attach Form 8880		. 4	
5a	Residential clean energy credit from Form 5695, line 15		. 5a	
b	Energy efficient home improvement credit from Form 5695, line 32		. 5b	
6	Other nonrefundable credits:			
а	General business credit. Attach Form 3800	6a		
b	Credit for prior year minimum tax. Attach Form 8801	6b		
С	Adoption credit. Attach Form 8839	6c		
d	Credit for the elderly or disabled. Attach Schedule R	6d		
е	Reserved for future use	6e		
f	Clean vehicle credit. Attach Form 8936	6f		
g	Mortgage interest credit. Attach Form 8396	6g		
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h		
i	Qualified electric vehicle credit. Attach Form 8834	6i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j		
k	Credit to holders of tax credit bonds. Attach Form 8912	6k		
ı	Amount on Form 8978, line 14. See instructions	6I		
m	Credit for previously owned clean vehicles. Attach Form 8936.	6m		
z	Other nonrefundable credits. List type and amount:			
		6z		
7	Total other nonrefundable credits. Add lines 6a through 6z		. 7	
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 10	940, 1040-SR,	or	
	1040-NR, line 20		. 8	2,000.
			(continu	ed on page 2)

Schedule 3 (Form 1040) 2023 Page **2**

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962	9		
10	Amount paid with request for extension to file (see instructions) .	10		
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for repayment of amounts included in income from earlier years	13b		
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c		
d	Deferred amount of net 965 tax liability (see instructions)	13d		
Z	Other payments or refundable credits. List type and amount:	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	

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.

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Go to www.irs.gov/ScheduleD for instructions and the latest information. Internal Revenue Service Name(s) shown on return Your social security number 137-45-2071 ABHIJEET SHINDE & SONALI VITHALDAS SHENOY Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

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. with column (g) line 2. 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 6,613. 240,463. 268,368. -21,292. Totals for all transactions reported on Form(s) 8949 with Box B checked 2,966. 2,976. -10. 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -21,302. 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 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** -21,302. 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 3,000.) • (\$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.

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

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

Social security number or taxpayer identification number

137-45-2071

ABHIJEET SHINDE & SONALI VITHALDAS SHENOY

instructions). For long-term transactions, see page 2.

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

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 (B) Short-term transactions	•	٠,,	-	•		•	e)
(C) Short-term transactions	not reported	to you on F	orm 1099-B	1	T		
(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)		Adjustment, in If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e) from column (d) and	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g).
FIDELITY BROKERAGE SERVICES LLC	01/01/23	12/31/23	123,090.	141,590.	W	3,749.	-14,751.
Robinhood Securities LLC	01/01/23	12/31/23	100,034.	107,514.	W	2,864.	-4,616.
Apex Clearing	01/01/23	12/31/23	17,339.	19,264.			-1,925.
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 e is checked), lir	lude on your ne 2 (if Box B	240,463.	268,368.		6,613.	-21,292.

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.

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.

OMB No. 1545-0074

Attachment Sequence No. 12A

Internal Revenue Service Name(s) shown on return

Department of the Treasury

Social security number or taxpayer identification number

137-45-2071

ABHIJEET SHINDE & SONALI VITHALDAS SHENOY

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 Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss) (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired disposed of (sales price) from column (d) and and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions. with column (a). instructions FIDELITY BROKERAGE SERVICES LLC 01/01/23 12/31/23 2,966. 2,976. -10. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

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.

2,966.

-10.

Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

above is checked), or line 3 (if Box C above is checked) .

2,976.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

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

OMB No. 1545-0074 Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service

) snown on return						Your socia	•		٢
ABHI	JEET SHINDE & SONALI VITHALDAS SHEN	OY					137-4	5-2071		
Part	Income or Loss From Rental Real Estat Note: If you are in the business of renting personal p rental income or loss from Form 4835 on page 2, line	roperty, use		c . See	instru	ctions. If you a	re an indiv	vidual, rep	ort farr	n
A [Did you make any payments in 2023 that would require		Form(s)	10002 5	Soo inc	structions		□ Vc	- X	No
	f "Yes," did you or will you file required Form(s) 1099									No
				• •					,3	110
1a	Physical address of each property (street, city, state	e, ZIP cod	e)							
Α										
В										
С										
1b	Type of Property 2 For each rental real estate p	roperty lis	ted		Fa	ir Rental	Person	al Use	0	JV
	(from list below) above, report the number of					Days	Da	ys	Q.	J V
Α	personal use days. Check the			Α		365		0		
В	if you meet the requirement qualified joint venture. See i			В						
С	qualified joint venture. See i	ristructions	5.	С						
Туре	of Property:					·				
1	Single Family Residence 3 Vacation/Short-Term	Rental	5 Lanc	ł	7	Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (descr	ibe)			
			1							
				_		Propertion	es:			
Incom				Α	0.5	В			С	
3	Rents received			5	06.					
<u> 4</u>	Royalties received	. 4								
Exper		_								
5	Advertising									
6	Auto and travel (see instructions)				4.5					
7	Cleaning and maintenance			1,7	41.					
8	Commissions									
9	Insurance									
10	Legal and other professional fees									
11	Management fees			1,3	26.					
12	Mortgage interest paid to banks, etc. (see instruction									
13	Other interest									
14	Repairs				96.					
15	Supplies			2,3	67.					
16	Taxes									
17	Utilities				43.					
18	Depreciation expense or depletion			4,1	42.					
19	Other (list) Total expenses. Add lines 5 through 19	19								
20				14,2	15.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties									
	result is a (loss), see instructions to find out if you m			10 -						
	file Form 6198			-13,7	09.					
22	Deductible rental real estate loss after limitation, if a	- 1								
	on Form 8582 (see instructions)		(13,70		()	()
23a	Total of all amounts reported on line 3 for all rental p	•			23a		506.			
b	Total of all amounts reported on line 4 for all royalty	-			23b					
С	Total of all amounts reported on line 12 for all prope				23c					
d	Total of all amounts reported on line 18 for all prope				23d		,142.			
е	Total of all amounts reported on line 20 for all prope				23e	14	,215.			
24	Income. Add positive amounts shown on line 21. Do		-				. 24			
25	Losses. Add royalty losses from line 21 and rental real							(13,70	09.)
26	Total rental real estate and royalty income or (lo									
	here. If Parts II, III, and IV, and line 40 on page 2 d									
	Schedule 1 (Form 1040), line 5. Otherwise, include the	his amount	t in the to	tal on li	ne 41	on page 2	. 26		-13,	709.

Form **8863**

Education Credits (American Opportunity and Lifetime Learning Credits)

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

you complete Parts I and II.

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/Form8863 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. 50

Your social security number

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ABHIJEET SHINDE & SONALI VITHALDAS SHENOY 137 45 2071

Complete a separate Part III on page 2 for each student for whom you're claiming either credit before

	_		
Part	Refundable American Opportunity Credit		
1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse		
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead		
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit		
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse		
6	If line 4 is:		
	• Equal to or more than line 5, enter 1.000 on line 6		
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rounded to at least three places)	6	
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year and meet the conditions described in the instructions, you can't take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box	7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the amount here and on Form 1040 or 1040-SR, line 29. Then go to line 9 below.	8	
Part	Nonrefundable Education Credits		
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions) .	9	
10	After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19	10	14,472.
11	Enter the smaller of line 10 or \$10,000	11	10,000.
12	Multiply line 11 by 20% (0.20)	12	2,000.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse		
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse		
17	If line 15 is:		
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18		
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to at least three places)	17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) .	18	2,000.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see instructions) here and on Schedule 3 (Form 1040), line 3	19	2.000.

·		
Name(s) shown on return	Your social security nur	mber
ARHIJEET SHINDE & SONALI VITHALDAS SHENOY	137 45	2071

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Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

Part	Part III Student and Educational Institution Information. See instructions.							
20	Student name (as shown on page 1 of your tax return)	21 Student social security number (as shown on page 1 of						
	SONALI VITHALDAS	your tax return)						
	SHENOY	676-81-3868						
	2 Educational institution information (see instructions)							
а	Name of first educational institution Westcliff University	b. Name of second educational institution (if any)						
	Address. Number and street (or P.O. box). City, town or	(1) Address. Number and street (or P.O. box). City, town or						
`	post office, state, and ZIP code. If a foreign address, see instructions.	post office, state, and ZIP code. If a foreign address, see instructions.						
	17877 Von Karman Ave.#400							
	IRVINE CA 92614							
(2	2) Did the student receive Form 1098-T from this institution for 2023? X Yes □ No	(2) Did the student receive Form 1098-T						
(;	B) Did the student receive Form 1098-T from this institution for 2022 with box ☐ Yes ☒ No 7 checked?	(3) Did the student receive Form 1098-T from this institution for 2022 with box Yes I 7 checked?						
(4	1) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	(4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.						
	46-0658370							
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?	$\begin{tabular}{lll} \hline Yes & - Stop! \\ \hline Go to line 31 for this student. & X No $-$ Go to line 24. \\ \hline \end{tabular}$						
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2023 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	X Yes − Go to line 25.No − Stop! Go to line for this student.						
25	Did the student complete the first 4 years of postsecondary education before 2023? See instructions.	X Yes − Stop! Go to line 31 for this student.						
26	Was the student convicted, before the end of 2023, of a felony for possession or distribution of a controlled substance?	$\begin{tabular}{lll} \hline & Yes - \textbf{Stop!} \\ \hline & Go to line 31 for this student. \\ \hline \end{tabular} & No - Complete lines 27 \\ & through 30 for this student. \\ \hline \end{tabular}$						
You can't take the American opportunity credit and the lifetime learning credit for the same student in the same year. If you complete lines 27 through 30 for this student, don't complete line 31.								
	American Opportunity Credit							
27	Adjusted qualified education expenses (see instructions). Do							
28	Subtract \$2,000 from line 27. If zero or less, enter -0							
29	, ,	29						
30	If line 28 is zero, enter the amount from line 27. Otherwise,							
	enter the result. Skip line 31. Include the total of all amounts Lifetime Learning Credit	from all Parts III, line 30, on Part I, line 1 . 30						
31	Adjusted qualified education expenses (see instructions). Inc	lude the total of all amounts from all Parts						
J1	III, line 31, on Part II, line 10							

Investment Interest Expense Deduction

Attachment

Identifying number

OMB No. 1545-0191

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

Attach to your tax return. Go to www.irs.gov/Form4952 for the latest information.

ABH.	IJEET SHINDE & SONALI VITHALDAS SHENOY	37-45	-20/I
Par	Total Investment Interest Expense		
1	Investment interest expense paid or accrued in 2023 (see instructions)	1	349.
2	Disallowed investment interest expense from 2022 Form 4952, line 7	2	
3	Total investment interest expense. Add lines 1 and 2	3	349.
Part	Net Investment Income		
4a	Gross income from property held for investment (excluding any net gain from		
	the disposition of property held for investment)	9.	
b	Qualified dividends included on line 4a		
С	Subtract line 4b from line 4a	4c	9.
d	Net gain from the disposition of property held for investment		
е	Enter the smaller of line 4d or your net capital gain from the disposition		
	of property held for investment. See instructions		
f	Subtract line 4e from line 4d	4f	0.
g	Enter the amount from lines 4b and 4e that you elect to include in investment income. See instruction		
h	Investment income. Add lines 4c, 4f, and 4g		9.
5	Investment expenses (see instructions)		
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0	· · · · · · · · · · · · · · · · · · ·	9.
Part	III Investment Interest Expense Deduction	·	
7	Disallowed investment interest expense to be carried forward to 2024. Subtract line 6 from lin	е	
	3. If zero or less, enter -0		340.
8	Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions	8	9.
For Pa	aperwork Reduction Act Notice, see page 4. BAA REV 03/04/24 PRO		Form 4952 (2023)

Department of the Treasury

Passive Activity Loss Limitations

See separate instructions.

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

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 Attachment Sequence No. 858

Internal Revenue Service Name(s) shown on return Identifying number ABHIJEET SHINDE & SONALI VITHALDAS SHENOY 137-45-2071 Part I 2023 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a Activities with net income (enter the amount from Part IV, column (a)) . . . **b** Activities with net loss (enter the amount from Part IV, column (b)) 1b 13,709. c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . . 1d -13,709. **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a)) . . . **b** Activities with net loss (enter the amount from Part V, column (b)) 2b **c** Prior years' unallowed losses (enter the amount from Part V, column (c)) . 2c (2d Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules 3 -13,709. If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. 4 Enter the **smaller** of the loss on line 1d or the loss on line 3 13,709. 5 Enter \$150,000. If married filing separately, see instructions 150,000. Enter modified adjusted gross income, but not less than zero. See instructions 6 111,064. Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 7 Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 8 19,468. Enter the **smaller** of line 4 or line 8. If line 3 includes any CRD, see instructions 13,709. Part III **Total Losses Allowed** 10 0. 10 Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find 11 13,709. Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Part IV Overall gain or loss Current year Prior years Name of activity (c) Unallowed (a) Net income (b) Net loss (d) Gain (e) Loss (line 1a) loss (line 1c) (line 1b) 0. 13,709. 13,709.

13,709.

Total. Enter on Part I, lines 1a, 1b, and 1c

Form 8582 (2023) Page **2**

Part V	Complete This Part Befor	еР	art I, Lines 2a	a, 2b,	and 2c. S	ee instru	ctions.				
	Name of activity		Current year			Prior years (c) Unallowed loss (line 2c)		Overall gain or loss			
			(a) Net income (line 2a)		Net loss ne 2b)			(d) Gain		(e) Loss	
Total. Enter	on Part I, lines 2a, 2b, and 2c										
Part VI	Use This Part if an Amour	nt Is	Shown on F	Part II,	Line 9. S	ee instruc	ctions.				
	Name of activity	an to I	rm or schedule ad line number be reported on the instructions)	(a	(a) Loss (b) R		atio	(a) Special		(d) Subtract column (c) from column (a).	
			E Ln 22		13,709.	1.0000	0000	13,70	9.	0.	
Total			13,709.		1.00		13,709.		0.		
Part VII	Allocation of Unallowed L	.oss	ses. See instri								
	Name of activity		Form or sche and line nun to be reporte (see instructi	nber ed on	(a) l	Loss		(b) Ratio (c		(c) Unallowed loss	
Total								1.00			
Part VIII	Allowed Losses. See instr		ons.	•				1.00			
	7 200001 000	<u></u>	Form or sche	dule							
	Name of activity		and line num to be reporte (see instruction		(a) l	Loss	(b) Ur	(b) Unallowed loss		(c) Allowed loss	
Total											