# 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

miorital rioronae contree						
Submission Identification	n Number (SID)					
Taxpayer's name	,		Social securit	y numbe	er	
VIPIN CHANDRAN			170-90-	-4726		
Spouse's name			Spouse's soc			
Double Toy Dolum	n Information Tay Very Ending De		Entar voor vou o	ro outh	orizina \	
	n Information — Tax Year Ending De	cember 31, 2023 (	Enter year you a	re autr	iorizing.)	í .
Enter whole dollars only	on lines 1 through 5. ers use line 4 only. Leave lines 1, 2, 3, and 5	blank				
	ncome			11	161	,454.
				2		,825.
	ax withheld from Form(s) W-2 and Form(s) 10			3		,195.
				4		,370.
•				5		, 370.
Part II Taxpayer	<b>Declaration and Signature Authoriza</b>	tion (Be sure you get	and keep a cop	y of yo	our retur	n)
my knowledge and belief, return (original or amended to send my return to the IR for any delay in processing Agent to initiate an ACH ele payment of my federal taxe authorization is to remain i payment, I must contact t business days prior to the taxes to receive confidenti personal identification num Electronic Funds Withdraws Taxpayer's PIN: check	one box only	re that the amounts in Part ermediate service provider, to gement of receipt or reason and. If applicable, I authorize the financial institution account ated tax, and the financial in asury Financial Agent to termostrate the service of the servic	I above are the amoransmitter, or electrofor rejection of the tree the U.S. Treasury and indicated in the tastitution to debit the minate the authorization requests must be in the processing of the payment. I furted) I am now authority	ounts from the counts from the	om the incurr originates on, (b) the esignated I aration soft or this according to the ctronic paynowledge	come tax for (ERO) e reason Financial tware for unt. This cancel) a r than 2 yment of that the
	LOBAL TAXES LLC	to enter or gen	erate mv PIN	4 7	2 6	as my
	ERO firm name e income tax return (original or amended) la		ř Ent		igits, but all zeros	ac,
☐ I will enter my F	PIN as my signature on the income tax returing your own PIN <b>and</b> your return is filed u	rn (original or amended) I				
Your signature ►		Dat	e►			
Spouse's PIN: check of	ne hox only					
I authorize	ne box only	to enter or gen	arate my PIN			as my
	ERO firm name	to dritter or gerr	_	er five d	igits, but	ao my
signature on the	e income tax return (original or amended) I a	am now authorizing.	do	n't enter	all zeros	
	PIN as my signature on the income tax returing your own PIN <b>and</b> your return is filed u					
Spouse's signature ►		Dat	e <b>▶</b>			
	Practitioner PIN Method Re	turns Only—continue b	elow			
Part III Certificati	on and Authentication — Practitione	r PIN Method Only				
ERO's EFIN/PIN. Enter	your six-digit EFIN followed by your five-dig	git self-selected PIN.	2 2 2 4 9 Don't ent	<u> </u>	8 2 7 os	1
authorized to file for tax ye	meric entry is my PIN, which is my signature for ear indicated above for the taxpayer(s) indicated ioner PIN method and <b>Pub. 1345</b> , Handbook for A	d above. I confirm that I am	ome tax return (origi submitting this retu	nal or a	mended) I	
ERO's signature ▶		Dat	e <b>▶</b>			
	ERO Must Retain This F					
	Don't Submit This Form to the I	no uniess kequested	10 DO 20			

# E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



For the year Jan	n. 1–Dec	a. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20		See	separ	ate instructions.	
Your first name and middle initial				Last name				You	Your social security number			
VIPIN			CHAN	IDRAN					1 17	0   9	0 4726	
If joint return, s	pouse's	s first name and middle initial	Last na	ame							ocial security number	
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ions.			Apt. no	).	Pres	identia	I Election Campaign	
2201 4TF	H AVI	ENUE					219			Check here if you, or your		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	State	е	ZIP code				ling jointly, want \$3 s fund. Checking a	
SEATTLE					WA		98121		0		will not change	
Foreign country	/ name			Foreign province/state/o	county	′	Foreign pos	tal coc	de your	tax or	refund.	
											You Spouse	
Filing Status	; X	Single			[	Head of ho	ousehold (H	IOH)				
Check only		Married filing jointly (even if only or	ne had	income)								
one box.		Married filing separately (MFS)			[	Qualifying	surviving s	pous	e (QSS	)		
	If y	ou checked the MFS box, enter the	name	of your spouse. If you	u ched	cked the HOH	or QSS be	x, er	nter the	child's	s name if the	
	qu	alifying person is a child but not you	ır depei	ndent:								
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	pavm	ent for prope	rtv or servi	ces):	or (b) s	ell.		
Assets		ange, or otherwise dispose of a digi					-			_	ີYes ⊠ No	
Standard	Som	eone can claim:	penden	t Your spouse	e as a	dependent						
Deduction		Spouse itemizes on a separate returi	n or yoı	u were a dual-status	alien	·						
Ago/Blindness	- Vau	Were born before January 2, 19	050 [	Are blind Spo	ouse:	□ Was bor	n before Ja	nuan	v 2 10	- - Ω Γ	ls blind	
			939 <u>[</u>	T ·			(4) Ob -				for (see instructions):	
Dependents		instructions): irst name Last name		(2) Social security number	'	(3) Relationshi to you	iP		credit		edit for other dependents	
If more than four	(1)	Lastrianie		Tid.Tibe.		10 700			1	-		
dependents,	-								]			
see instructions	s —								]			
and check here	1								]	_		
-	 1a	Total amount from Form(s) W-2, bo	ox 1 (se	ee instructions)	- 1					1a	172,336.	
Income	b		`	,					·	1b	1,2,000	
Attach Form(s) W-2 here. Also	C	Household employee wages not reported on Form(s) W-2								1c		
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d		
W-2G and	e									1e		
1099-R if tax was withheld.	f									1f		
If you did not	g	Wages from Form 8919, line 6.							. [	1g		
get a Form	h	Other earned income (see instructi	ons)						. [	1h	0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	,	ructions)		1i						
	z	A stat time and a discount of the								1z	172,336.	
Attach Sch. B	2a	Tax-exempt interest	2a		<b>b</b> Ta	xable interest	·			2b	944.	
if required.	За	Qualified dividends	3a		<b>b</b> Or	dinary divider	nds		. [	3b		
	4a	IRA distributions	4a			xable amount			. [	4b		
Standard Deduction for—	5a	Pensions and annuities	5a		<b>b</b> Ta	xable amount	t		. [	5b		
Single or	6a	Social security benefits	6a		<b>b</b> Ta	xable amount	t		. [	6b		
Married filing separately,	С	If you elect to use the lump-sum el	lection	method, check here	(see ii	nstructions)						
\$13,850	7	Capital gain or (loss). Attach Sched	dule D i	f required. If not requ	uired,	check here				7	-10.	
Married filing jointly or	8	Additional income from Schedule	1, line 1	0					. [	8	-11,816.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	come					9	161,454.	
\$27,700	10	Adjustments to income from Schee	dule 1,	line 26					. [	10		
Head of household,	11	Subtract line 10 from line 9. This is	your <b>a</b>	djusted gross incon	me				. [	11	161,454.	
\$20,800 If you checked <sub>r</sub>	12	Standard deduction or itemized	deduct	tions (from Schedule	A)				.	12	13,850.	
any box under Standard	13	Qualified business income deducti	on fron	n Form 8995 or Form	1 8995	5-А			. L	13		
Deduction,	14	Add lines 12 and 13							. L	14	13,850.	
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This is y	our <b>t</b> a	axable incom	e			15	147,604.	

Form 1040 (202)	3)								Page Z
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	28,825.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	28,825.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0				22	28,825.
	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 <b>total tax</b>					24	28,825.
<b>Payments</b>	25	Federal income tax withheld	I from:						
_	а	Form(s) W-2				<b>25a</b> 31	,195.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	31,195.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	)22 return			26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27			
allacii Scii. Eic.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	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	ndable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	31,195.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amoun	t you <b>overpaid</b>		34	2,370.
	35a	Amount of line 34 you want			is attached, chec	k here		35a	2,370.
Direct deposit?	b	Routing number 0 3 1				Checking	Savings		
See instructions.	d	Account number 3 6 2	3 7 4 4	5 1 4 3	3				
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	
	38	Estimated tax penalty (see in	_	-		38			
Third Party		you want to allow another							
Designee		,	•				omplete	below.	<b>⋈</b> No
· ·		esignee's	Phone Personal				ification		
		me		no.			ber (PIN)		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com							
Here									nt you an Identity
	10	Your signature		Date Your occupation					IN, enter it here
Joint return?					JOB		(see	inst.)	
See instructions.		ouse's signature. If a joint return,	<b>both</b> must sign.	Date	Spouse's occupation	on			nt your spouse an
Keep a copy for your records.							ntity Prote inst.)	ection PIN, enter it here	
	Ph	one no. (412) 320-028	6	Email address	VCHANDRAN8	60GMAIL.CO	M		
Paid	Pr	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/11/2024	P0208	2703	Self-employed
Preparer Use Only	Fir	Firm's name GLOBAL TAXES LLC P					Pho	ne no.	(678) 965-9522
————	Fir	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816					Firn	ı's EIN	84-3171965

# SCHEDULE 1 (Form 1040)

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

2023
Attachment
Sequence No. 01

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

VIPIN CHANDRAN

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.

Attachment Sequence No. 01 Your social security number

170-90-4726

Taxable refunds, credits, or offsets of state and local income taxes			
		<u>1</u>	
Alimony received		<b>2</b> a	
Date of original divorce or separation agreement (see instructions):			
Business income or (loss). Attach Schedule C		3	
			-11,816
Farm income or (loss). Attach Schedule F		6	
Unemployment compensation		7	
Other income:			
Net operating loss	8a (	)	
Gambling	8b		
Cancellation of debt	8c		
Foreign earned income exclusion from Form 2555	8d (	)	
Income from Form 8853	8e		
Income from Form 8889	8f		
Alaska Permanent Fund dividends	8g		
Jury duty pay	8h		
	8i		
	8j		
Stock options	8k		
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		
	8m		
,	8n		
	80		
	8p		
	-		
	8r		
	8s (	)	
	,		
	8t		
Other income. List type and amount:			
	8z		
		9	
	Business income or (loss). Attach Schedule C Other gains or (losses). Attach Form 4797 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Farm income or (loss). Attach Schedule F. Unemployment compensation Other income: Net operating loss Gambling Cancellation of debt Foreign earned income exclusion from Form 2555 Income from Form 8853 Income from Form 8889 Alaska Permanent Fund dividends Jury duty pay Prizes and awards Activity not engaged in for profit income Stock options 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 Olympic and Paralympic medals and USOC prize money (see instructions) Section 951(a) inclusion (see instructions) Section 461(l) excess business loss adjustment Taxable distributions from an ABLE account (see instructions) Scholarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan Wages earned while incarcerated Other income. Add lines 8a through 8z	Business income or (losss). Attach Schedule C Other gains or (losses). Attach Form 4797 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Farm income or (loss). Attach Schedule F Unemployment compensation Other income: Net operating loss Gambling Gancellation of debt Foreign earned income exclusion from Form 2555 Rocallation of Gebt Foreign earned income exclusion from Form 2555 Rocallation form Rorm 8853 Rocallation Form 8899 Rocallation Form Rocallation Form 2555 Rocallation Form Rocallation Form Rocallation Form Form 8899 Rocallation Form Rocallation Form Rocallation Form Form 8899 Rocallation Form Rocallation Form Rocallation Rocallat	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Farm income or (loss). Attach Schedule F Unemployment compensation Other income:  Net operating loss Read ( ) Gambling Cancellation of debt Foreign earned income exclusion from Form 2555 Red ( ) Income from Form 8853 Income from Form 8853 Income from Form 8889 Alaska Permanent Fund dividends Jury duty pay Rizes and awards Activity not engaged in for profit income Stock options 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 Olympic and Paralympic medals and USOC prize money (see instructions) Section 951(a) inclusion (see instructions) Section 951(a) inclusion (see instructions) Section 461(l) excess business loss adjustment Taxable distributions from an ABLE account (see instructions) Scholarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan Wages earned while incarcerated Other income. List type and amount:

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-ba	asis government		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903 .		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	ła		
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit	łb		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses	ld		
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24	lg		
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	łh		
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
j	Housing deduction from Form 2555	4j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	łk		
Z	Other adjustments. List type and amount:			
<b>0</b> -			05	
25 26	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> . E	nter here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	<u> </u>	26	

# 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 PIN CHANDRAN			l	social se	ecurity number 4726
Did	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additional			s ⊠ No	<u> </u>	1720
	rt I Short-Term Capital Gains and Losses—Ge	•			see ins	tructions)
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustm to gain or lo Form(s) 894 line 2, colo	ss from 9, Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	1,646.	1,656.			-10.
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 (lo	oss) from Forms 4	1684, 6781, and 88	824	4	
5	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>	Carryove	r 6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	through 6 in colu	ımn (h). If you hav	e any long		-10.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets I	Held More Than	One Yea	r (see	instructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustm to gain or lo Form(s) 894	ss from 9, Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
	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.			line 2, colu	umn (g)	with column (g)
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> 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 Schee	dule(s) K-1	12	
	Capital gain distributions. See the instructions				13	
	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	olumn (h). Then, g	o to Part II	1	

15

Schedule D (Form 1040) 2023 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -10. • 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. □ 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 10.) 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 gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

## 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

Name(s) shown on return VIPIN CHANDRAN

Department of the Treasury

Internal Revenue Service

Social security number or taxpayer identification number 170-90-4726

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)

☐ (C) S	Short-term transactions	not reported	to you on F	orm 1099-B				
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 If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)	
	xample: 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).
FIDELITY E	BROKERAGE SERVICES LLC	01/01/23	12/31/23	1,646.	1,656.			-10.
2 Totals.	Add the amounts in columns	s (d), (e), (g), and	d (h) (subtract					
negative Schedul	e amounts). Enter each totale D, line 1b (if Box A above	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	1 646	1 656			_10

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.

#### **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.

Your social security number

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

VIPI	N CHANDRAN							170-9	0-4726		
Part	Note: If you are	oss From Rental Real Estate an in the business of renting personal proper loss from Form 4835 on page 2, line 40.	nd Roy rty, use	/alties Schedule	<b>c</b> . See	instruc	tions. If you	are an indiv	vidual, rep	oort farm	
	Did you make any pay f "Yes," did you or wi										
1a		f each property (street, city, state, ZIF									
				<u> </u>							
<u>A</u> B	NO:5, JAIALAK	SHMI NAGAR, PART IV ADHAN	NUR V	LLLAGE	ı IN (	00320	)				
	Tune of Droperty	O Fay and wantal year estate when				Fai	Danstal	Dawasa	al IIaa		
ID	Type of Property (from list below)	2 For each rental real estate prope above, report the number of fair	rental a	and	nd <b>Days</b>			Person Da	QJV		
Α	3	personal use days. Check the Q			Α		365		0		
В		if you meet the requirements to f qualified joint venture. See instru			В						
C		quantou joint vorture. God mone		•	С						
1	of Property: Single Family Resider Multi-Family Residen		ital	5 Land 6 Roya							
_							Propert	ies:			
Incon					Α	0.5	В			С	
3			3		6	85.					
4			4								
Exper											
5		instructions	5 6								
6	·	instructions)	7		2 5	60					
7		enance	8		2,5	00.					
8 9			9								
10		fessional fees	10								
11			11		1,4	20					
12		aid to banks, etc. (see instructions)	12		1,4	20.					
13			13								
14			14		2,9	64					
15			15		3,4						
16			16		0,1	-					
17			17		2,0	98.					
18		se or depletion	18		, -						
19	Other (list)		19								
20		d lines 5 through 19	20		12,5	01.					
21		n line 3 (rents) and/or 4 (royalties). If a instructions to find out if you must									
	file Form 6198		21		-11,8	16.					
22		al estate loss after limitation, if any, instructions)	22 (	(	11,81	6.)(		)	(	)	
23a		reported on line 3 for all rental prope				23a		685.			
b		reported on line 4 for all royalty prop				23b					
С		reported on line 12 for all properties				23c					
d		reported on line 18 for all properties				23d					
е		reported on line 20 for all properties				23e	12	2,501.			
24		ve amounts shown on line 21. Do not						. 24			
25		osses from line 21 and rental real estat							(	11,816.	
26		state and royalty income or (loss).									
		and IV, and line 40 on page 2 do no						on   26		-11.816	