1040		rtment of the Treasury—Internal Revenue Servi 5. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use C	only—Do no	ot write or st	aple in this s	space.
For the year Jan	. 1–Dec	. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20	See	separate	instructio	ons.
Your first name	and mi	ddle initial	Last r	name						Your	social se	curity nun	nber
ABEER			КАТ	IYAL 189 59 768				7682					
	pouse's	first name and middle initial	Last r									l security	
DEBOLINA	4		GAN	GULY						12	3 45	1557	
		r and street). If you have a P.O. box, see						A	pt. no.			ection Ca	
160 CAME	BRTDO	GEPARK DR						4	31			you, or yo	
		ce. If you have a foreign address, also co	mplete	spaces be						jointly, w			
CAMBRIDO	ΞE					MZ	Ą	021	40			not chan	0
Foreign country				Foreign p	rovince/state/	count	ty	Foreig	n postal co		tax or ref		90
											Y	ou 🗌 🗄	Spouse
Filing Status		Single					Head of he	ouseh	old (HOH)				
Check only		Married filing jointly (even if only o	ne hac	income)									
one box.		Married filing separately (MFS)					Qualifying	surviv	ing spous	se (QSS)			
	lf y	ou checked the MFS box, enter the	name	of your s	pouse. If you	u che	ecked the HOF	l or Q	SS box, e	nter the	child's na	ame if the	3
	qu	alifying person is a child but not you	ur depe	endent:						\sim			
Diaital	At an	ny time during 2023, did you: (a) rec	eive (a	s a rewar	d award or	navr	ment for prope	rty or	services):	or (b) se	11		
Digital Assets		ange, or otherwise dispose of a dig								. ,	, V	es 🗙 I	No
Standard		eone can claim: You as a de					a dependent	4. (-		,		<u> </u>	
Deduction		Spouse itemizes on a separate retur			No. 1997 - Alterna								
Age/Blindness	S You:	Were born before January 2, 1	959	Are b	lind Spo	ouse	: 🗌 Was bor	n befo	ore Januar	y 2, 195	9 🗌 I	ls blind	
Dependents	s (see	instructions):		(2) 5	Social security	,	(3) Relationsh	14) Check the			(see instru	uctions):
If more		rst name Last name			number		to you		Child ta:	k credit	Credit f	or other dep	pendents
than four]			
dependents,													
see instructions and check	5]			
here]			
Income	1a	Total amount from Form(s) W-2, b	ox 1 (s	ee instruc	ctions) .					•1	1a	268,6	649.
Attach Form(s)	b	Household employee wages not re	eporte	d on Form	n(s) W-2 .			• •		•	1b		
W-2 here. Also	С	Tip income not reported on line 1a	a (see i	nstructior	ns)						1c		
attach Forms	d	Medicaid waiver payments not rep	oorted	on Form(s	s) W-2 (see ir	nstru	uctions)	• ×		•	1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fo	orm 2441,	, line 26	• •			· · ·	-	1e		
was withheld.	f	Employer-provided adoption bene	efits fro	m Form 8	8839, 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 instruct				• •	• • ¤	$\gamma = 2$			1h		0.
instructions.	i	Nontaxable combat pay election (s	see ins	structions)	0	• •	1 i						
	<u>z</u>	Add lines 1a through 1h	· i		lat i e e	• •		•			1z	268,6	
Attach Sch. B	2a		2a		675		axable interest			-	2b		783.
if required.	<u>3a</u>		3a		,675.		Ordinary divider		• • •		3b		813.
Standard	4a		4a	47,	,496.		axable amoun		• • •		4b	36,8	390.
Deduction for-	5a	and the second sec	5a				axable amoun		· · ·	_	5b		
 Single or Married filing 	6a	· · · · · · · · · · · · · · · · · · ·	6a				axable amoun	t	· · ·	<u> </u>	6b		
separately,	c	If you elect to use the lump-sum e						× ×			_		000
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche						•	· · ·		7		000.
jointly or Qualifying	8	Additional income from Schedule						• •		·	8	-22,9	
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								•	9	286,2	<u>209.</u>
\$27,700 • Head of	10	Adjustments to income from Sche					\cdot \cdot \cdot \cdot	• •		· -	10		
household, \$20,800	11	Subtract line 10 from line 9. This is	-		-			a -	• • •		11	286,2	
• If you checked	12	Standard deduction or itemized						• •	· · ·	•	12		700.
any box under <i>Standard</i>	13	Qualified business income deduct	ion fro	m Form 8	995 or Form	899	15-A	• •		· -	13		133.
Deduction, see instructions.	14	Add lines 12 and 13			••••••••••••••••••••••••••••••••••••••					· -	14		833.
	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-u This is y	our	taxable incom	ie .		•	15	258,3	3/6.

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

Form 1040 (2023)

b Form(s) 1099 25b c Other forms (see instructions) 25c d Add lines 25a through 25c 25c d Add lines 25a through 25c 25c 1f you have a qualifying child, attach Sch. ElC. 26 2023 estimated tax payments and amount applied from 2022 return 27 28 2023 estimated tax payments and amount applied from 2022 return	. 16 . . <td.< th=""><th>48,659. 48,659. 21. 21. 48,638. 261. 48,899. 42,418.</th></td.<>	48,659. 48,659. 21. 21. 48,638. 261. 48,899. 42,418.
18 Add lines 16 and 17	. . 18 . . 19 . . 20 . . 21 . . 22 . . 23 . . 24 214. . 204. . . . 25d	21. 21. 48,638. 261. 48,899.
19 Child tax credit or credit for other dependents from Schedule 8812 20 Amount from Schedule 3, line 8 21 Add lines 19 and 20 22 Subtract line 21 from line 18. If zero or less, enter -0- 23 Other taxes, including self-employment tax, from Schedule 2, line 21 24 Add lines 22 and 23. This is your total tax Payments 25 25 Federal income tax withheld from: a Form(s) 1099 c Other forms (see instructions) d Add lines 25a through 25c c Other forms (see instructions) d Add lines 25a through 25c d Add lines 25a through 25c 26 2023 estimated tax payments and amount applied from 2022 return attach Sch. Elo. 27 28 Additional child tax credit from Schedule 8812 30 Reserved for future use 31 Amount from Schedule 3, line 15 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments 33 Add lines 25d, 26, and 32. These are your total payments 34 <td> 19 20 21 23 23 24 214. 204. 25d</td> <td>21. 21. 48,638. 261. 48,899.</td>	19 20 21 23 23 24 214. 204. 25d	21. 21. 48,638. 261. 48,899.
20 Amount from Schedule 3, line 8 21 Add lines 19 and 20 22 Subtract line 21 from line 18. If zero or less, enter -0- 23 Other taxes, including self-employment tax, from Schedule 2, line 21 24 Add lines 22 and 23. This is your total tax 25 Federal income tax withheld from: a Form(s) W-2 b Form(s) 1099 c Other forms (see instructions) b Form(s) 1099 c Other forms (see instructions) d Add lines 25a through 25c d Add lines 25a through 25c d Additional child tax credit from Schedule 8812 27 Earned income credit (EIC) 28 29 30 31 31 Amount from Schedule 3, line 15 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments 33 Add lines 25d, 26, and 32. These are your total payments 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to yo	20 21 22 23 24 214 204 25d	21. 48,638. 261. 48,899.
21 Add lines 19 and 20	. . 21 . . 22 . . 23 . . 24 214. . 204. . . .	21. 48,638. 261. 48,899.
21 Add lines 19 and 20	22 23 24 214. 204. . 25d	48,638. 261. 48,899.
23 Other taxes, including self-employment tax, from Schedule 2, line 21 24 Add lines 22 and 23. This is your total tax Payments 25 Federal income tax withheld from: a Form(s) W-2 25a b Form(s) 1099 25b c Other forms (see instructions) 25c d Add lines 25a through 25c 25c d Add lines 25a through 25c 25c d Add lines 25a through 25c No 2023 estimated tax payments and amount applied from 2022 return 27 28 29 attach Sch. EIC. 28 29 Additional child tax credit from Schedule 8812 28 29 American opportunity credit from Form 8863, line 8 29 30 Reserved for future use 30 31 Amount from Schedule 3, line 15 31 32 Add lines 25d, 26, and 32. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments 1 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want ref	23 24 214. 204. . 25d	261. 48,899.
24 Add lines 22 and 23. This is your total tax	· · 24 214. 204. · . 25d	48,899.
24 Add lines 22 and 23. This is your total tax	214. 204. 25 d	48,899.
Payments 25 Federal income tax withheld from: a Form(s) W-2 25 42, b Form(s) 1099 25b 25b c Other forms (see instructions) 25c 25c d Add lines 25a through 25c 2023 estimated tax payments and amount applied from 2022 return 27 2023 estimated tax payments and amount applied from 2022 return No 27 28 2023 estimated tax credit from Schedule 8812 No 27 28 Additional child tax credit from Schedule 8812 8 29 30 Reserved for future use 30 31 31 Amount from Schedule 3, line 15 31 30 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 34 33 Add lines 25d, 26, and 32. These are your total payments	214. 204. 25 d	
a Form(s) W-2 25a 42, b Form(s) 1099 25c 25b c Other forms (see instructions) 25c 25c d Add lines 25a through 25c 25c 25c d Add lines 25a through 25c gualifying child, attach Sch. ElC. 27 Earned income credit (ElC) 28 Additional child tax credit from Schedule 8812 28 29 American opportunity credit from Form 8863, line 8 30 Reserved for future use 31 Amount from Schedule 3, line 15 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amou	204 . 25 d	42,418.
b Form(s) 1099 25b c Other forms (see instructions) 25c d Add lines 25a through 25c 25c d Add lines 25a through 25c 2023 estimated tax payments and amount applied from 2022 return 27 2023 estimated tax payments and amount applied from 2022 return 27 26 2023 estimated tax payments and amount applied from 2022 return 27 27 Earned income credit (EIC) 28 29 Additional child tax credit from Schedule 8812 28 29 American opportunity credit from Form 8863, 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 payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here Direct deposit? b Routing number <t< td=""><td> 25d</td><td>42,418.</td></t<>	25 d	42,418.
c Other forms (see instructions) 25c If you have a qualifying child, attach Sch. EIC. 26 2023 estimated tax payments and amount applied from 2022 return 27 27 Earned income credit (EIC) 28 29 Additional child tax credit from Schedule 8812 29 American opportunity credit from Form 8863, 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 payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here Direct deposit? b Routing number X X X X X X X X X X X X X X X X X <td< td=""><td> 25d</td><td>42,418.</td></td<>	25 d	42,418.
d Add lines 25a through 25c	25 d	42,418.
If you have a qualifying child, attach Sch. ElC. 2023 estimated tax payments and amount applied from 2022 return		
In you have a qualifying child, attach Sch. ElC. 27 28 28 29 Additional child tax credit from Schedule 8812 28 29 American opportunity credit from Form 8863, line 8 29 30 Reserved for future use 29 31 Amount from Schedule 3, line 15 30 31 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments		
attach Sch. EIC. 28 29 Additional child tax credit from Schedule 8812 28 29 American opportunity credit from Form 8863, line 8 29 30 Reserved for future use 30 31 Amount from Schedule 3, line 15 30 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments . 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here . Direct deposit? b Routing number X X X X X X X X X X X X X X c Type: Checking Sa		
29 American opportunity credit from Form 8863, line 8	\geq	
30 Reserved for future use 30 31 Amount from Schedule 3, line 15 31 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here Direct deposit? b Bouting number X X X X X X Sa		
31 Amount from Schedule 3, line 15 31 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments		
32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments Add lines 25d, 26, and 32. These are your total payments		
33 Add lines 25d, 26, and 32. These are your total payments Refund 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here Direct deposit? b Routing number X X X X X X X X X X X X X X	32	
Refund 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here Direct deposit? b Routing number X X X X X X X X Sa	33	42,418.
35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here . Direct deposit? b Routing number X X X X X X X X X X c Type: Checking Sa	34	12,110.
Direct deposit? b Routing number X X X X X X X X X X X X c Type: Checking Sa		
	avings	
	.vings	
d Account number X X X X X X X X X X X X X X X X X X X		
Amount37Subtract line 33 from line 24. This is the amount you owe.You OweFor details on how to pay, go to www.irs.gov/Payments or see instructions	37	6 5 6 2
38 Estimated tax penalty (see instructions)	82.	6,563.
	02.	
Third Party Do you want to allow another person to discuss this return with the IRS? See instructions	nplete below.	× No
	al identification	
name no. number		
Sign Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, belief they are true correct and complete Declaration of propage (other than toppage) is based on all information		
belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information	of which prepa	rer has any knowledge.
Your signature Date Your occupation		ent you an Identity
	Protection F (see inst.)	PIN, enter it here
Joint return? TECHNICAL ARCHITECT See instructions. Spouse's signature. If a joint return, both must sign. Date Spouse's occupation		ent your spouse an
Keep a copy for		tection PIN, enter it here
your records. POSTDOCTORAL FELLOW	(see inst.)	
Phone no. (206) 693-0594 Email address ABEERKATIYAL92@GMAIL.COM		
Preparer's name Preparer's signature Date F	PTIN	Check if:
Paid SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/01/2024 P	02082703	Self-employed
Preparer - CLOBAL TAYES LLC		(678) 965-9522
Use Only Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816		
Go to www.irs.gov/Form1040 for instructions and the latest information. BAA REV 03/07/24 PRO	Firm's EIN	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

Attachment Sequence No. **01**

Your social security number

189-59-7682

Name(s) shown on Form 1040, 1040-SR, or 1040-NR ABEER KATIYAL & DEBOLINA GANGULY

831.
831.
831.
831.
831.
831.
005
905.
026
926.
040) 2023

Par	t II 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	й й н н й й _л н	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		24a	_	
b	Deductible expenses related to income reported on line 8I 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	0.41		
	discrimination claims (see instructions)	24h	-	
Ì	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:			
		24z		
25	Total other adjustments. Add lines 24a through 24z	<u> </u>	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income	e. Enter here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA	REV 03/07/24 PRO	Sched	ile 1 (Form 1040) 2023

SCHED	ULE	2
(Form 1	040)	

Additional Taxes

OMB No. 1545-0074

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

2023

	nent of the Treasury		Attachment
	Go to www.irs.gov/Form1040 for instructions and the latest information.		Sequence No. 02
			security number
		89-59-7	682
Pa	rt I Tax		
1	Alternative minimum tax. Attach Form 6251	. <u>1</u>	
2	Excess advance premium tax credit repayment. Attach Form 8962	. 2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	. 3	
Par	t II Other Taxes		
4	Self-employment tax. Attach Schedule SE	. 4	
5	Social security and Medicare tax on unreported tip income.5Attach Form 41375		
6	Uncollected social security and Medicare tax on wages. Attach Form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	. 7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if require	ed.	
	If not required, check here	8	0.
9	Household employment taxes. Attach Schedule H	. 9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	. 10	
11	Additional Medicare Tax. Attach Form 8959	. 11	261.
12	Net investment income tax. Attach Form 8960	. 12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term insurance from Form W-2, box 12	life . 13	
14	Interest on tax due on installment income from the sale of certain residential I and timeshares	lots . 14	
15	Interest on the deferred tax on gain from certain installment sales with a sales prover \$150,000		
16	Recapture of low-income housing credit. Attach Form 8611	. 16	
		(contin	und on page 2

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

(continued on page 2) Schedule 2 (Form 1040) 2023

Par	Other Taxes (continued)			
17	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount:			
		17a		
b	Recapture of federal mortgage subsidy, if you sold your home			
		17b	-	
-	Additional tax on HSA distributions. Attach Form 8889	17c	-	
a	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
е	Additional tax on Archer MSA distributions. Attach Form 8853 .	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
I	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
z	Any other taxes. List type and amount:			
		17z		
18	Total additional taxes. Add lines 17a through 17z		18	
19	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your total other taxe on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21	261.
	ВАА	REV 03/07/24 PRO	Schedu	ule 2 (Form 1040) 2023

Additional Credits and Payments

OMB No. 1545-0074

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

20 3 Attachment Sequence No. 03

	ment of the Treasury Revenue Service Go to www.irs.gov/Form1040 for instructions and the latest information.			Attachment Sequence No. 03		
		orm 1040, 1040-SR, or 1040-NR			cial s	ecurity number
ABE Par		& DEBOLINA GANGULY fundable Credits		189-5	9-70	682
1	3	credit. Attach Form 1116 if required		 Attoch	1	21.
2	Form 2441	child and dependent care expenses from Form 2441	, iirie 11 		2	
3	Education c	redits from Form 8863, line 19			3	
4	Retirement	savings contributions credit. Attach Form 8880			4	
5a	Residential	clean energy credit from Form 5695, line 15			5a	
b	Energy effic	ient home improvement credit from Form 5695, line 32			5b	
6	Other nonre	fundable credits:				
а	General bus	siness credit. Attach Form 3800	6a			
b	Credit for p	rior year minimum tax. Attach Form 8801	6b			
С	Adoption cr	edit. Attach Form 8839............	6c			
d	Credit for th	e elderly or disabled. Attach Schedule R	6d			
е	Reserved for	or future use	6e			
f	Clean vehic	le credit. Attach Form 8936	6f			
g	Mortgage in	iterest credit. Attach Form 8396	6g			
h	District of Co	olumbia first-time homebuyer credit. Attach Form 8859	6h			
i	Qualified ele	ectric vehicle credit. Attach Form 8834	6i			
j	Alternative f	uel vehicle refueling property credit. Attach Form 8911	6 j			
k	Credit to ho	Iders of tax credit bonds. Attach Form 8912	6k			
I	Amount on	Form 8978, line 14. See instructions	6I			
m	Credit for p	reviously owned clean vehicles. Attach Form 8936 .	6m			
z	Other nonre	fundable credits. List type and amount:				
			6z			
7		3			7	
8	Add lines 1 1040-NR, lir	through 4, 5a, 5b, and 7. Enter here and on Form 10 ne 20	040, 1040- 	SR, or	8	21.
				(co	ntinu	ued on page 2)

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

Schedule 3 (Form 1040) 2023

Schedule 3 (Form 1040) 2023

Par	t 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		
b	Credit for repayment of amounts included in income from earlier years		
С	Elective payment election amount from Form 3800, Part III, line 6, column (i)		
d	Deferred amount of net 965 tax liability (see instructions) 13d		
z	Other payments or refundable credits. List type and amount:		
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-SR, or 1040-NR, line 31	15	
	BAA REV 03/07/24 PRO	Schedu	le 3 (Form 1040) 2023

SCHEDULE B (Form 1040)

Financial Assets.

See instructions.

8

Department of the Treasury

Interest and Ordinary Dividends

OMB No. 1545-0074 2

(0)

Attach to	Form	1040 or	1040-SR.

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

Attachment Internal Revenue Service Sequence No. 08 Your social security number Name(s) shown on return 189-59-7682 ABEER KATIYAL & DEBOLINA GANGULY Amount Part I List name of payer. If any interest is from a seller-financed mortgage and the 1 buyer used the property as a personal residence, see the instructions and list this Interest interest first. Also, show that buyer's social security number and address: DISCOVER BANK (See instructions 32. and the CAPITAL ONE 620. Instructions for GOLDMAN SACHS BANK USA 151. Form 1040, line 2b.) Citibank Client Services 1,663. Note: If you GOLDMAN SACHS BANK USA 650. received a 3. Interactive Brokers LLC Form 1099-INT. ROBINHOOD SECURITIES LLC 26. Form 1099-OID, or substitute FIDELITY 128. statement from 510. FIDELITY a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form. 2 Add the amounts on line 1 2 3,783. 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. 3 3**,**783. 4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b 4 Note: If line 4 is over \$1,500, you must complete Part III. Amount 5 List name of payer: Interactive Brokers LLC 1,874. Part II ROBINHOOD SECURITIES LLC 766. -----Ordinary ROBINHOOD SECURITIES LLC 4. Dividends FIDELITY _____ 169. (See instructions and the Instructions for Form 1040, 5 line 3b.) Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary 6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b 6 2,813. dividends shown on that form. Note: If line 6 is over \$1,500, you must complete Part III. Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. Foreign Accounts Yes No and Trusts 7a At any time during 2023, did you have a financial interest in or signature authority over a financial Caution: If account (such as a bank account, securities account, or brokerage account) located in a foreign required, failure to X file FinCEN Form If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial 114 may result in substantial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 penalties. and its instructions for filing requirements and exceptions to those requirements Additionally, you b If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the may be required financial account(s) is (are) located: to file Form 8938, Statement of Specified Foreign

During 2023, did you receive a distribution from, or were you the grantor of, or transferor to, a

foreign trust? If "Yes," you may have to file Form 3520. See instructions . For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/07/24 PRO

Schedule B (Form 1040) 2023

X

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

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

Your social security number

20

Attachment

Internal Revenue Service Name(s) shown on return

Department of the Treasury

ABEER KATIYAL & DEBOLINA GANGULY

189-59-7682

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?	Yes	× No	
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting	g your gain	or loss.	

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

	instructions for how to figure the amounts to enter on the below.	(d)	(e)	(g) Adjustments	(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 fron Form(s) 8949, Part line 2, column (g)	I, combine the result
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	2,305.	2,028.	-20	. 257.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked				
3	Totals for all transactions reported on Form(s) 8949 with Box C checked				
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324 4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1		estates, and tr	usts from 5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions		our Capital Loss		(5,377.)
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise			e any long-	-5,120.

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

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, Part II, line 2, column (g)		combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	23,516.	26,220.			-2,704.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Sched	dule(s) K-1	12	
13	Capital gain distributions. See the instructions				13	3.
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	/, from line 13 of y 	-	-	14	()
15	Net long-term capital gain or (loss). Combine lines 8a on the back .				15	-2,701.

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	-7,82
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.		
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.		
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.		
17	Are lines 15 and 16 both gains?		
••	\Box 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.		
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:		
	 The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) 	21	(<u>3,000</u>
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?		
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.		
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		
	BAA REV 03/07/24 PRO	Sch	edule D (Form 1040) 2

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Go to www.irs.gov/Form8949 for instructions and the latest information.



Name(s) shown on returnSocial security number or taxpayer identification numberABEER KATIYAL & DEBOLINA GANGULY189-59-7682

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

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

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

C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see <i>Column</i> (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).	
ROBINHOOD SECURITIES LLC	01/01/23	12/31/23	2,087.	1,983.	E	-20.	84.	
Interactive Brokers LLC	01/01/23	12/31/23	218.	45.			173.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked). or line 3 (if Box (al here and inc is checked), lir	lude on your ne 2 (if Box B	2,305.	2,028.		-20.	257.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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

Form 8949 (2023)	Attachment Sequence No. 12A	Page 2
		-

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side ABEER KATIYAL & DEBOLINA GANGULY

Social security number or taxpayer identification number 189-59-7682

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

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

[] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	if any, to gain or loss amount in column (g), code in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Apex Clearing	01/01/22	12/31/23	1,095.	4,138.			-3,043.
ROBINHOOD SECURITIES LLC	01/01/22	12/31/23	4,721.	6,419.			-1,698.
ROBINHOOD SECURITIES LLC	01/01/22	12/31/23	1,011.	1,000.			11.
Interactive Brokers LLC	01/01/22	12/31/23	9,773.	10,113.			-340.
Interactive Brokers LLC	01/01/22	12/31/23	6,916.	4,550.			2,366.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	I here and inclusion is checked), lin	lude on your ne 9 (if Box E	23,516.	26,220.			-2,704.
above is checked), or time TO (II DOX	above is chec	neu)					- <i>∠</i> ,/04.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

REV 03/07/24 PRO

SCHE (Form	DULE E	(F		pplementa							OMB No.	1545-0074
		(From r	rental real estate, roya	ities, partnersi to Form 1040,		-			trusts, REMICS	s, etc.)	20	23
	ent of the Treasury Revenue Service		Go to www.irs.gov						formation.		Attachm Sequenc	ent e No. 13
Name(s)	shown on return								١	our socia	al security n	
ABEE	R KATIYAL	& DEBC	OLINA GANGULY							189-5	9-7682	
Part	I Income	or Los	s From Rental Re	al Estate an	d Ro	yalties						
	Note: If yo	u are in t	the business of renting ss from Form 4835 on p	personal proper	ty, use	Schedul	e C. See	instru	ctions. If you are	e an indiv	vidual, repo	ort farm
A D			ents in 2023 that wou									
			ou file required Form									
1 a			ach property (street,									
Α	401, MAYU	R VIHA	AR COLONY ASHO	KA VIHAR,	BHOR	PAL MAI	DHYA I	PRAD	ESH IN 462	2010		
В												
С												
1b	Type of Prope		For each rental rea					Fa		Person		QJV
-	(from list below	<u>v)</u>	above, report the r personal use days						Days	Da	-	
 	3	_	if you meet the req	uirements to f	ile as	a	A B		365		0	
<u>С</u>			qualified joint vent	ure. See instru	ictions	5.	C					
	of Property:											
	Single Family R	esidence	e 3 Vacation/Sh	nort-Term Ren	tal	5 Land	b	7	Self-Rental			
	Multi-Family Re			I		6 Roya	alties	8	Other (describ	ce)		
									Propertie			
Incom	e.						Α		B	<u>.</u>		С
3		1			3		1,8	54.	_			<u> </u>
4					4		,					
Expen												
5	Advertising .				5							
6			structions)		6							
7			ance		7		3,9	64.				
8					8							
9					9 10							
10 11	•	-	sional fees		11		3,4	10				
12	J. J		l to banks, etc. (see i		12	r	5,4	10.				
13	00				13							
14	Repairs				14		4,4	85.				
15					15		4,9	85.				
16	Taxes				16							
17				-	17		2,4					
18		xpense	or depletion		18		6,3	46.				
19	Other (list)		Thread 10		19		25 6					
20			nes 5 through 19 .		20		25,6	83.				
21			ine 3 (rents) and/or 4 Instructions to find out									
	file Form 6198			5	21		-23,8	31.				
22	Deductible ren	tal real e	estate loss after limit	tation, if any,								
	on Form 8582	(see ins	tructions)		22	(23,83	1.)	()	()
23a	Total of all am	ounts rep	ported on line 3 for a	all rental prope	rties			23 a	1,	854.		
b			ported on line 4 for a					23b				
С			ported on line 12 for					23c		245		
d		-	ported on line 18 for					23d		346.		
е 24			ported on line 20 for					23e	25,	685.		
24 25			amounts shown on li ses from line 21 and r					· ·	tal losses hero	24 25	(?	23,831.)
25 26			te and royalty inco								<u> </u>	
20			d IV, and line 40 on									
			0), line 5. Otherwise,							26	-	23,831.
For Pa	perwork Reduct	ion Act N	lotice, see the separa	te instructions.		N	PA		-23,831.	Sch	nedule E (Fo	orm 1040) 2023

Form **5329** Department of the Treasury Internal Revenue Service

Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/Form5329 for instructions and the latest information.

	OMB No. 1545-0074
	2023
	Attachment Sequence No. 29
)	ur social security number
~	

Name of individual subject to additional tax. If married filing jointly, see instructions. Your social security number DEBOLINA GANGULY 123-45-1557 Home address (number and street), or P.O. box if mail is not delivered to your home Apt. no.						
,				-		
DEBOLINA GANGULY Fill in Your Address Only if You Are Filing This Form by Itself and Not	Home address (number and street), or P.O. box it		Apt. no.			
Fill in Your Address Only if You Are Filing This Form by Itself and Not With Your Tax Return	City, town or post office, state, and ZIP code. If y below. See instructions.	If this is an return, che				
	Foreign country name	Foreign province/state/county	Foreign post	tal code		

If you **only** owe the additional 10% tax on the full amount of the early distributions, you may be able to report this tax directly on Schedule 2 (Form 1040), line 8, without filing Form 5329. See instructions.

Par	Additional Tax on Early Distributions. Complete this part if you took a taxable distribution disaster distribution) before you reached age 59½ from a qualified retirement plan (including endowment contract (unless you are reporting this tax directly on Schedule 2 (Form 1040)—see have to complete this part to indicate that you qualify for an exception to the additional tax on excertain Roth IRA distributions. See instructions.	g an abov	IRA) or modified /e). You may also
1	Early distributions includible in income (see instructions). For Roth IRA distributions, see instructions.	1	
2	Early distributions included on line 1 that are not subject to the additional tax (see instructions). Enter the appropriate exception number from the instructions:	2	
3	Amount subject to additional tax. Subtract line 2 from line 1	3	
4	Additional tax. Enter 10% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040), line 8.	4	
	Caution: If any part of the amount on line 3 was a distribution from a SIMPLE IRA, you may have to		
	include 25% of that amount on line 4 instead of 10%. See instructions.		
Part	Additional Tax on Certain Distributions From Education Accounts and ABLE Accounts	nts. (Complete this part
	if you included an amount in income, on Schedule 1 (Form 1040), line 8z, from a Coverdell edu		
	(ESA) or a qualified tuition program (QTP), or on Schedule 1 (Form 1040), line 8q, from an ABLE acc	count	·
5	Distributions included in income from a Coverdell ESA, a QTP, or an ABLE account	5	
6	Distributions included on line 5 that are not subject to the additional tax (see instructions)	6	
7	Amount subject to additional tax. Subtract line 6 from line 5	7	
8	Additional tax. Enter 10% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040), line 8	8	
Part	Additional Tax on Excess Contributions to Traditional IRAs. Complete this part if you contraditional IRAs for 2023 than is allowable or you had an amount on line 17 of your 2022 Form 5329		uted more to your
9	Enter your excess contributions from line 16 of your 2022 Form 5329. See instructions. If zero, go to line 15	9	
10	If your traditional IRA contributions for 2023 are less than your maximum		
10	allowable contribution, see instructions. Otherwise, enter -0 10		
11	2023 traditional IRA distributions included in income (see instructions) 11		
12	2023 distributions of prior year excess contributions (see instructions) 12		
13	Add lines 10, 11, and 12	13	
14	Prior year excess contributions. Subtract line 13 from line 9. If zero or less, enter -0	14	
15	Excess contributions for 2023 (see instructions)	15	
16	Total excess contributions. Add lines 14 and 15	16	
17	Additional tax. Enter 6% (0.06) of the smaller of line 16 or the value of your traditional IRAs on December		
	31, 2023 (including 2023 contributions made in 2024). Include this amount on Schedule 2 (Form 1040), line 8	17	
Part	IRAs for 2023 than is allowable or you had an amount on line 25 of your 2022 Form 5329.	uted r	more to your Roth
18	Enter your excess contributions from line 24 of your 2022 Form 5329. See instructions. If zero, go to line 23	18	0.
19	If your Roth IRA contributions for 2023 are less than your maximum allowable		
	contribution, see instructions. Otherwise, enter -0		
20	2023 distributions from your Roth IRAs (see instructions)		
21	Add lines 19 and 20	21	
22	Prior year excess contributions. Subtract line 21 from line 18. If zero or less, enter -0	22	4 100
23	Excess contributions for 2023 (see instructions)	23	4,106.
24 25	Total excess contributions. Add lines 22 and 23	24	4,106.
25	2023 (including 2023 contributions made in 2024). Include this amount on Schedule 2 (Form 1040), line 8	25	0.

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

Form 53	329 (2023	3)						Page 2
Part				tributions to Coverdell ESAs. Contract the contract of the con	•	•		•
26	Enter	the excess c	ontributions from line 32 o	f your 2022 Form 5329. See instruction	s. If zero, go	o to line 31	26	
27				SAs for 2023 were less than the uctions. Otherwise, enter -0	27			
28					28			
29			-				29	
30	Prior	year excess	contributions. Subtract lin	ne 29 from line 26. If zero or less, ente	r-0		30	
31	Exces	s contribution	ons for 2023 (see instruct	ions)			31	
32				nd 31			32	
33			, <i>j</i>	er of line 32 or the value of your Coverde in 2024). Include this amount on Schedu			33	
Part				ibutions to Archer MSAs. Comple				olover contributed
				nan is allowable or you had an amount	•	-		
34				of your 2022 Form 5329. See instruction		-	34	
35				or 2023 are less than the maximum herwise, enter -0-	35			
36	2023	distributions	from your Archer MSAs	from Form 8853, line 8 🧠 🦾 🧸 🗸	36			
37	Add I	ines 35 and 3	36				37	
38	Prior	year excess	contributions. Subtract lin	ne 37 from line 34. If zero or less, ente	r-0		38	
39	Exces	ss contribution	ons for 2023 (see instruct	ions)			39	
40	Total	excess cont	ributions. Add lines 38 an	nd 39			40	
41	Dece	mber 31, 20	23 (including 2023 contril	smaller of line 40 or the value of y butions made in 2024). Include this a	mount on S	Schedule 2		
Deut				· · · · · · · · · · · · · · ·			41	
Part \		someone on		tributions to Health Savings Ac nployer contributed more to your HS 5329.				
42			•	of your 2022 Form 5329. If zero, go to	line 47		42	
43	lf the	contributio	ons to your HSAs for 2	2023 are less than the maximum herwise, enter -0	43		-16-	
44				rm 8889, line 16	44			
45							45	
46				ne 45 from line 42. If zero or less, ente			46	
47				ions)			47	
48				nd 47			48	
49				aller of line 48 or the value of your HS				
10				2024). Include this amount on Schedule			49	
Part V		<u>.</u>		ibutions to an ABLE Account. Co			tributi	ons to your ABLE
			2023 were more than is a					
50	Exces	s contributio	ons for 2023 (see instruct	ions)			50	
51				maller of line 50 or the value of yo				
				n Schedule 2 (Form 1040), line 8			51	
Part	IX .	Additional	Tax on Excess Accur	nulation in Qualified Retirement quired distribution from your qualified	Plans (In	cluding IR/	As). C	complete this part
52				e instructions)			52	
53				(see instructions)			53	
54		-	rom line 52. If zero or less			also and all	54	
55				calculate the additional tax. If you qu			•.	
55	rate c	n excess ac	cumulations in at least or	ne qualified retirement plan, check this 040), line 8 or Form 1041, Schedule G	box.		55	
Sign 4		nly if You	Under penalties of perjury, I dec	clare that I have examined this form, including acco	mpanying atta	chments, and to	the bes	t of my knowledge and
		his Form	belief, it is true, correct, and com	plete. Declaration of preparer (other than taxpayer) is	s based on all ir	nformation of whi	ch prepa	arer has any knowledge.
		Not With						
Your 1			Your signature			Date		
		Print/Type prep	parer's name	Preparer's signature	Date	Check	if	PTIN
Paid						self-emp		
Prep		Firm's name				Firm's EIN		
Use	Uniy	Firm's address	3			Phone no.		

Form **5329** (2023)

Form	8606
-	.

Nondeductible IRAs

OMB No. 1545-0074

		Attach to	2023 Form 10	040, 1040-SR, or 1040-I	NR.		2	023
	nent of the Treasury Revenue Service			structions and the late			Attacl Seque	hment ence No. 48
	f married, file a sepa	arate form for each spouse required to file	2023 Form 860	6. See instructions.			c <mark>ial secu</mark> 59 - 76	irity number
	Your Address	Home address (number and street, or P	.O. box if mail is	not delivered to your home)		Apt. n	
Only if You Are Filing This Form by Itself and Not With		City, town or post office, state, and ZIP	code. If you hav	e a foreign address, also co	omplete the spaces b	elow (see ins	tructions).
	Tax Return	Foreign country name		Foreign province/state/co	ounty	Foreign	oostal co	de
Part		luctible Contributions to Tra ditional SIMPLE IRAs	aditional IF	As and Distribution	ons From Trad	litional, T	raditio	onal SEP,
	Complete	e this part only if one or more of	the following	apply.				
	 You too contrib (other t 	ade nondeductible contributions ok distributions from a traditiona utions to a traditional IRA in 202 han certain qualified disaster dis ne distribution to fund an HSA, c	l, traditional \$ 3 or an earlie tribution rep	SEP, or traditional SIN r year. For this purpo ayments from 2023 F	se, a distribution orm(s) 8915-F), o	n does not qualified cl	include naritabl	a rollover
		nverted part, but not all, of your IMPLE IRAs in 2023 and you ma						
1 2 3	from January Enter your tota	ndeductible contributions to tra 1, 2024, through April 15, 2024, al basis in traditional IRAs. See ir d 2	See instructions	ons			1 2 3	6,500. 0. 6,500.
	In 2023, did y traditional, tr SIMPLE IRA	you take a distribution from raditional SEP, or traditional s, or make a Roth, Roth SEP, PLE IRA conversion?	1	Enter the amount Do not complete				
4	Enter those co	ntributions included on line 1 that	were made	from January 1, 2024,	through April 15	, 2024	4	
5 6	2023, plus any	From line 3	al SEP, and t certain repa	yments of qualified d	isaster distributi	per 31, ions, if	5 6	6,500.
7	include rollove 8915-F (see in conversions 1	tributions from traditional, traditions ers (other than repayments of questructions)); qualified charitable to a Roth, Roth SEP, or Rottions of traditional IRA contributions	ualified disase distribution oth SIMPLE	ster distributions, if an s; a one-time distribu IRA; certain returr	ny, from 2023 F ution to fund an ned contribution	orm(s) HSA; ns; or	7	
8		amount you converted from trac P, or Roth SIMPLE IRAs in 2023					3	
9	Add lines 6, 7,				9			
10	places. If the r	by line 9. Enter the result as a esult is 1.000 or more, enter "1.0			10 ×			
11	converted to I	B by line 10. This is the nontax Roth, Roth SEP, or Roth SIMPL	E IRAs. Also	o, enter this amount	11			
12	that you did no	by line 10. This is the nontaxa ot convert to a Roth, Roth SEP, o	or Roth SIMF	PLE IRA	12			
13		nd 12. This is the nontaxable po					3	6,500.
14 15a		3 from line 3. This is your total 2 from line 7					4 5a	0. 36,890.
b	Enter the amo 8915-F (see in	unt on line 15a attributable to q istructions). Also, enter this amo	ualified disation	ster distributions, if a Form(s) 8915-F, line	ny, from 2023 F 18, as applicabl	orm(s) le (see	ōb	50,090.
с	Form 1040, 10	u nt. Subtract line 15b from line 1)40-SR, or 1040-NR, line 4b .				1	ōc	36,890.
		y be subject to an additional 10 e of the distribution. See instruc			if you were und able IRA Distribution Wkst (per I			

Form 8	606 (2023)						Page 2
Part		onversions From Tra MPLE IRAs	ditional, Traditional SEP, or	Traditional SIMPL	E IRAs to I	Roth, Roth	SEP, or
		e this part if you convert P, or Roth SIMPLE IRA i	ed part or all of your traditional, n 2023.	traditional SEP, and tra	aditional SIN	IPLE IRAs to	o a Roth,
16	from tradition	al, traditional SEP, and	unt from line 8. Otherwise, ente traditional SIMPLE IRAs to Ro	th, Roth SEP, or Roth	n SIMPLE	16	
17			ount from line 11. Otherwise, en	-		17	
18			m line 16. If more than zero, al			18	
Part			th SEP, or Roth SIMPLE IR				
	distributi 8915-F (on does not include a ro	ok a distribution from a Roth, Ro llover (other than a repayment o ed charitable distribution, one-ti e instructions).	f a qualified disaster di	stribution fr	om 2023 Fo	rm(s)
19	including any	qualified first-time home	tions from Roth, Roth SEP, ar buyer distributions, and any qua	alified disaster distribut	ions from	19	
20			es (see instructions). Do not er st-time homebuyer distributions			20	_
21			less, enter -0			21	
22			nd Roth SIMPLE IRA contributio		line 21 is	22	
23			r less, enter -0- and skip lines 2 e instructions)			23	
24	rollovers from	qualified retirement plar	traditional, traditional SEP, and store a Roth, Roth SEP, or Roth	SIMPLE IRA. See instru	uctions .	24	
25a			less, enter -0- and skip lines 25			25a	
b	8915-F (see in	structions). Also, enter	ble to qualified disaster distribution his amount on 2023 Form(s) 89	15-F, line 19, as applie	cable (see	25b	
с	Taxable amo	unt. Subtract line 25b fro	om line 25a. If more than zero, a	lso include this amoun	t on 2023	25c	
if You This I	Here Only J Are Filing Form by Itself Not With Your	Under penalties of perjury, I dec	lare that I have examined this form, includin Declaration of preparer (other than taxpayer)	g accompanying attachments,	and to the best		
Tax F	Return	Your signature			Date		_
	Duringt /T.	no proporor'o pomo	Droporor's signature	Dete			

		J					
Paid	Print/Ty	pe preparer's	s name	Preparer's signature	Date	Check if self-employed	PTIN
Preparer	Firm's n	ame		1	-	Firm's EIN	·
Use Only	Firm's address					Phone no.	

BAA

REV 03/07/24 PRO

Form 8606 (2023)

Form	8606	
Dener		

Nondeductible IRAs

OMB No. 1545-0074 2023

Attach to 2023 Form 1040, 1040-SR, or 1040-NR.

	Revenue Service	Go to <i>www.irs.gov/Form86</i> 06 for i	nstructions and the latest information.	Attachment Sequence No. 48
Name. I	f married, file a sepa	arate form for each spouse required to file 2023 Form 860	06. See instructions.	Your social security number
DEBO	LINA GANGU	LY		123-45-1557
	Your Address f You Are	Home address (number and street, or P.O. box if mail is		Apt. no.
Filing	This Form by and Not With	City, town or post office, state, and ZIP code. If you have	ve a foreign address, also complete the spaces bel	ow (see instructions).
	Tax Return	Foreign country name	Foreign province/state/county	Foreign postal code
Part		luctible Contributions to Traditional II ditional SIMPLE IRAs	RAs and Distributions From Tradit	ional, Traditional SEP,
	Complete	e this part only if one or more of the followin	g apply.	
	 You too contribu (other t 	ade nondeductible contributions to a traditio ok distributions from a traditional, traditional utions to a traditional IRA in 2023 or an earlie han certain qualified disaster distribution rep	SEP, or traditional SIMPLE IRA in 2023 er year. For this purpose, a distribution o payments from 2023 Form(s) 8915-F), qu	does not include a rollover ualified charitable distribution,
	• You co	ne distribution to fund an HSA, conversion, m nverted part, but not all, of your traditional, t IMPLE IRAs in 2023 and you made nondedu	raditional SEP, and traditional SIMPLE I	RAs to Roth, Roth SEP, or
1		ndeductible contributions to traditional IRA		
1		1, 2024, through April 15, 2024. See instruct		1 6,000.
2		al basis in traditional IRAs. See instructions		2 0.
3	Add lines 1 an	d 2		. . 3 6,000.
		you take a distribution from No - raditional SEP, or traditional No	Enter the amount from line 3 on line Do not complete the rest of Part I.	e 14.
		s, or make a Roth, Roth SEP, PLE IRA conversion?		
4		ntributions included on line 1 that were made	from January 1, 2024, through April 15, 2	
5	Subtract line 4			. . 5 6,000 .
6	2023, plus any	e of all your traditional, traditional SEP, and / outstanding rollovers. Subtract certain reparts of the second secon	ayments of qualified disaster distribution	ns, if
-				6
7		tributions from traditional, traditional SEP, a ers (other than repayments of qualified disa		
		is (other than repayments of qualified disanstructions)); qualified charitable distribution		
		to a Roth, Roth SEP, or Roth SIMPLE		
		tions of traditional IRA contributions (see ins		
8		amount you converted from traditional, trad		
		P, or Roth SIMPLE IRAs in 2023. Also, enter	1 1	8
9	Add lines 6, 7,			
10	places. If the r	by line 9. Enter the result as a decimal ro esult is 1.000 or more, enter "1.000"	10 ×	
11		by line 10. This is the nontaxable portion		
		Roth, Roth SEP, or Roth SIMPLE IRAs. Als		
12		by line 10. This is the nontaxable portion		
12	that you did no	ot convert to a Roth, Roth SEP, or Roth SIM nd 12. This is the nontaxable portion of all y	PLÉ IRA 12	13 4,106.
14		3 from line 3. This is your total basis in trad		
1 4 15a		2 from line 7		
b		ount on line 15a attributable to qualified disa		
-	8915-F (see in	istructions). Also, enter this amount on 2023	B Form(s) 8915-F, line 18, as applicable	(see
С	Taxable amou	unt. Subtract line 15b from line 15a. If more 040-SR, or 1040-NR, line 4b	than zero, also include this amount on 2	2023
	Note: You ma	y be subject to an additional 10% tax on th e of the distribution. See instructions.	e amount on line 15c if you were under	age

 $59 \ensuremath{\frac{1}{2}}$ at the time of the distribution. See instructions.

Form 8	606 (2023)						Page 2
Part		onversions From Tra MPLE IRAs	ditional, Traditional SEP, or	Traditional SIMPL	E IRAs to I	Roth, Roth	SEP, or
		e this part if you convert P, or Roth SIMPLE IRA i	ed part or all of your traditional, n 2023.	traditional SEP, and tra	aditional SIN	IPLE IRAs to	o a Roth,
16	from tradition	al, traditional SEP, and	unt from line 8. Otherwise, ente traditional SIMPLE IRAs to Ro	th, Roth SEP, or Roth	n SIMPLE	16	
17			ount from line 11. Otherwise, en	-		17	
18			m line 16. If more than zero, al			18	
Part			th SEP, or Roth SIMPLE IR				
	distributi 8915-F (on does not include a ro	ok a distribution from a Roth, Ro llover (other than a repayment o ed charitable distribution, one-ti e instructions).	f a qualified disaster di	stribution fr	om 2023 Fo	rm(s)
19	including any	qualified first-time home	tions from Roth, Roth SEP, ar buyer distributions, and any qua	alified disaster distribut	ions from	19	
20			es (see instructions). Do not er st-time homebuyer distributions			20	_
21			less, enter -0			21	
22			nd Roth SIMPLE IRA contributio		line 21 is	22	
23			r less, enter -0- and skip lines 2 e instructions)			23	
24	rollovers from	qualified retirement plar	traditional, traditional SEP, and store a Roth, Roth SEP, or Roth	SIMPLE IRA. See instru	uctions .	24	
25a			less, enter -0- and skip lines 25			25a	
b	8915-F (see in	structions). Also, enter	ble to qualified disaster distribution his amount on 2023 Form(s) 89	15-F, line 19, as applie	cable (see	25b	
с	Taxable amo	unt. Subtract line 25b fro	om line 25a. If more than zero, a	lso include this amoun	t on 2023	25c	
if You This I	Here Only J Are Filing Form by Itself Not With Your	Under penalties of perjury, I dec	lare that I have examined this form, includin Declaration of preparer (other than taxpayer)	g accompanying attachments,	and to the best		
Tax F	Return	Your signature			Date		_
	Duringt /T.	no proporor'o pomo	Droporor's signature	Dete			

		J					
Paid	Print/Ty	pe preparer's	s name	Preparer's signature	Date	Check if self-employed	PTIN
Preparer	Firm's n	ame		1	-	Firm's EIN	·
Use Only	Firm's address					Phone no.	

BAA

REV 03/07/24 PRO

Form 8606 (2023)

Form 888 Department of the Treasury

Health Savings Accounts (HSAs)

OMB No. 1545-0074

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

2

Internal F	Revenue Service	Go to www.irs.gov/Form8889 for instructions and the latest inform	nation.	ŝ	equence No. 52
		40, 1040-SR, or 1040-NR			f HSA beneficiary. As, see instructions.
	R KATIYAL		189-59		
Befor	e you begin:	Complete Form 8853, Archer MSAs and Long-Term Care Insurance	ce Contracts, if	requi	ired.
Part		ntributions and Deduction. See the instructions before completing you and your spouse each have separate HSAs, complete a sep			
1	Check the bo See instruction	x to indicate your coverage under a high-deductible health plan (HDHP) during 2023.	Se	lf-only 🗵 Family
2	unextended d contributions t	ions you made for 2023 (or those made on your behalf), including those ue date of your tax return that were for 2023. Do not include employer hrough a cafeteria plan, or rollovers. See instructions	contributions,	2	0.
3	were, or were	der age 55 at the end of 2023 and, on the first day of every month du considered, an eligible individual with the same coverage, enter \$3,8 e). All others , see the instructions for the amount to enter	50 (\$7,750 for	3	7,750.
4	lines 1 and 2.	unt you and your employer contributed to your Archer MSAs for 2023 fro If you or your spouse had family coverage under an HDHP at any time du nount contributed to your spouse's Archer MSAs	ring 2023, also	4	0.
5		from line 3. If zero or less, enter -0		5	7,750.
6		unt from line 5. But if you and your spouse each have separate HSAs a			
_	•	er an HDHP at any time during 2023, see the instructions for the amount to		6	7,750.
7		e 55 or older at the end of 2023, married, and you or your spouse had fa P at any time during 2023, enter your additional contribution amount. See		7	
8				8	7,750.
9		ributions made to your HSAs for 2023	3,850.		
10		funding distributions			
11	Add lines 9 an	d 10		11	3,850.
12		1 from line 8. If zero or less, enter -0		12	3,900.
13		n. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040)		13	0.
	Caution: If line	e 2 is more than line 13, you may have to pay an additional tax. See instru	ctions.		
Part		stributions. If you are filing jointly and both you and your spouse e ate Part II for each spouse.	each have sepa	rate H	ISAs, complete
14a	Total distributi	ons you received in 2023 from all HSAs (see instructions)		14a	
b	contributions	ncluded on line 14a that you rolled over to another HSA. Also include (and the earnings on those excess contributions) included on line the due date of your return. See instructions		14b	
c	-	4b from line 14a		140 14c	
15		cal expenses paid using HSA distributions (see instructions)		15	
16	Taxable HSA	distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Als total on Schedule 1 (Form 1040), Part I, line 8f	so, include this	16	
17a	If any of the d	istributions included on line 16 meet any of the Exceptions to the Addi included here	tional 20%		
	Additional 20 are subject to 1040), Part II,	% tax (see instructions). Enter 20% (0.20) of the distributions included the additional 20% tax. Also, include this amount in the total on Sch ine 17c .	on line 16 that edule 2 (Form	17b	
Part	complet complet	and Additional Tax for Failure To Maintain HDHP Coverage. S ing this part. If you are filing jointly and both you and your spouse e a separate Part III for each spouse.	each have sepa	arate	
18		le		18	
19		funding distribution		19	
20		Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Pa		20	
21		κ. Multiply line 20 by 10% (0.10). Include this amount in the total on Sch ine 17d		21	

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

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8995 for instructions and the latest information.

Name(s) shown on return

ABEER KATIYAL & DEBOLINA GANGULY

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

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

1	(a) Trade, business, or aggregation name (b) Taxpayer identification number			(c) Qualified business income or (loss)		
i						
ii						
iii						
iv						
v						
		2				
		<mark>3 ()</mark> 4				
	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0- Qualified business income component. Multiply line 4 by 20% (0.20)	+	5			
	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)	6 65.	5			
	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior	7 ()				
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero	3 665.				
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9		133.	
10	Qualified business income deduction before the income limitation. Add lines 5 and		10		133.	
11 12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	1 258,509. 2 1,675.				
13		3 256,834.				
14	Income limitation. Multiply line 13 by 20% (0.20)		14		<u>5</u> 1,367.	
	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter the applicable line of your return (see instructions)		15		133.	
	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than z		16	(0.)	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and zero, enter -0-	7. If greater than	17		0.)	
	zero, enter -0		17	<u> (</u>	0 .) orm 8995 (2023)	

OMB No. 1545-2294

Attachment Sequence No. 55

20

Your taxpayer identification number

189-59-7682

8959 Form

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions. Attach to Form 1040, 1040-SR, 1040-NR, or 1040-SS.

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074 2023 Attachment Sequence No. 71

100 50 7000

Your social security number

ABEE	R KATIYAL & DEBOLINA GANGULY	189-59-7	7682
Part	Additional Medicare Tax on Medicare Wages	·	
1	Medicare wages and tips from Form W-2, box 5. If you have more than one	0.016	
•		9,016.	
2	Unreported tips from Form 4137, line 6		
3	Wages from Form 8919, line 6 3 Additional difference 4	0.016	
4		9,016.	
5	Enter the following amount for your filing status:		
	Married filing jointly .		
		0,000.	
6			29,016.
6	Subtract line 5 from line 4. If zero or less, enter -0		29,010.
7	Part II		261.
Part			
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you		
	had a loss, enter -0		
9	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately		
	Single, Head of household, or Qualifying surviving spouse \$200,000 9		
10	Enter the amount from line 4		
11	Subtract line 10 from line 9. If zero or less, enter -0		
12	Subtract line 11 from line 8. If zero or less, enter -0		
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter h		
	go to Part III		
Part		tion	
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14		
45	(see instructions)		
15	Enter the following amount for your filing status:		
	Married filing jointly \$250,000 Married filing separately \$125,000		
	Single, Head of household, or Qualifying surviving spouse \$200,000 15		
16	Subtract line 15 from line 14. If zero or less, enter -0	16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9%		
17	Enter here and go to Part IV		
Part			
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1	040-SS	
	filers, see instructions), and go to Part V		261.
Part			
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form		
	W-2, enter the total of the amounts from box 6	4,250.	
20	Enter the amount from line 1	9,016.	
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax		
		4,046.	
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Additional Medica		
	withholding on Medicare wages		204.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W 14 (see instructions)		
04			
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-S		
			204.
For Pa	normark Reduction Act Nation, and your tay return instructions	8/07/24 PRO	Form 8959 (2023)
		101/24110	· · · · /

Form **8960**

Department of the Treasury Internal Revenue Service

Name(s) shown on your tax return

Net Investment Income Tax— Individuals, Estates, and Trusts

OMB No. 1545-2227

Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.

	2023 Attachment Sequence No. 72
Your soci	al security number or EIN
189-5	9-7682

ABEI	ER KATIYAL & DEBOLINA GANGULY		189-5	9-7	682
Part	Investment Income Section 6013(g) election (see instructions)				
	Section 6013(h) election (see instructions)				
	Regulations section 1.1411-10(g) election (see in Regulations section 1.1411-10(g) election (see in Regulation (see in Regulatio	structions)			
1	Taxable interest (see instructions)			1	3,783.
2	Ordinary dividends (see instructions)			2	2,813.
3	Annuities (see instructions)			3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or				
	businesses, etc. (see instructions)	4a -23,	831.		
b	Adjustment for net income or loss derived in the ordinary course of a non-				
	section 1411 trade or business (see instructions)	4b			
с	Combine lines 4a and 4b		4	lc	-23,831.
5a	Net gain or loss from disposition of property (see instructions)	5a -3,	000.		
b	Net gain or loss from disposition of property that is not subject to net				
	investment income tax (see instructions)	5b			
с	Adjustment from disposition of partnership interest or S corporation stock (see				
	instructions)	5c			
d	Combine lines 5a through 5c		5	id	-3,000.
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)		🖸	6	
7	Other modifications to investment income (see instructions)		[]	7	4.
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7		📑	8	-20,231.
Part		ications			
9a	Investment interest expenses (see instructions)	9a			
b	State, local, and foreign income tax (see instructions)	9b			
С	Miscellaneous investment expenses (see instructions)	9c			
d	Add lines 9a, 9b, and 9c		9	d	
10	Additional modifications (see instructions)		[1	0	
11	Total deductions and modifications. Add lines 9d and 10		1	1	
Part	II Tax Computation				
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals,				
	Estates and trusts, complete lines 18a-21. If zero or less, enter -0		• • 1	2	0.
	Individuals:				
13	Modified adjusted gross income (see instructions)		209.		
14	Threshold based on filing status (see instructions)		.000.		
15	Subtract line 14 from line 13. If zero or less, enter -0		209.		
16	Enter the smaller of line 12 or line 15			6	0.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). En	ter here and inc			
	on your tax return (see instructions)		· · [1	7	0.
	Estates and Trusts:	I			
18a	Net investment income (line 12 above)	18a			
b	Deductions for distributions of net investment income and charitable				
	deductions (see instructions)	18b			
С	Undistributed net investment income. Subtract line 18b from line 18a (see				
	instructions). If zero or less, enter -0	18c			
19a	Adjusted gross income (see instructions)	19a			
b	Highest tax bracket for estates and trusts for the year (see instructions) .	19b			
c	Subtract line 19b from line 19a. If zero or less, enter -0	19c			
20	Enter the smaller of line 18c or line 19c			20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.	U38). Enter here			
	include on your tax return (see instructions)			21	

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

BAA

REV 03/07/24 PRO

Form 8960 (2023)

Continuation Statement

Additional Information From 2023 Federal Tax Return

Schedule 1: Additional Income and Adjustments to Income Other Income

Description	Amou	nt
Substitute Payment from 1099-Misc		4.
Other Income from box 3 of 1099-Misc		7.
Nonemployee compensation from 1099-NEC		894.
	Total	905.