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

	10701100 0011100						
Submi	ssion Identification Number (S	SID)					
Taxpaye	er's name			Social secur	ity numl	ber	
SHRI	EYASHEE SINHA			369-49	-699	7	
Spouse'	s name			Spouse's so			•
Dowl	Tay Datawa Informat	ion Tou Voor Ending De		2 /Frataniaani		the audinion of	<u> </u>
Part		ion – Tax Year Ending De	cember 31, 202	3 (Enter year you	are au	tnorizing.)
	whole dollars only on lines 1 th	_	: blank				
Note:		only. Leave lines 1, 2, 3, and 5			1 1	161	,832.
2	Total tax				2		, 915.
3		rom Form(s) W-2 and Form(s) 1			3		,075.
4	Amount you want refunded to	. ,			4		,160.
5	•				5	3	,100.
Part		n and Signature Authoriza	tion (Be sure you g	et and keep a co	by of y	our retu	rn)
my know return (to send for any Agent t payment authorize payment business taxes t persona	owledge and belief, it is true, comoriginal or amended) I am now aud my return to the IRS and to recedelay in processing the return or to initiate an ACH electronic funds not of my federal taxes owed on the zation is to remain in full force and it. I must contact the U.S. Treass days prior to the payment (setto receive confidential information)	I have examined a copy of the incorrect, and complete. I further declarationizing. I consent to allow my interest from the IRS (a) an acknowled refund, and (c) the date of any refuse withdrawal (direct debit) entry to a sis return and/or a payment of estimated effect until I notify the U.S. Tresury Financial Agent at 1-888-35 dement) date. I also authorize the fun necessary to answer inquiries a pow is my signature for the income	are that the amounts in Freemediate service provid gement of receipt or reasund. If applicable, I author the financial institution achated tax, and the financial assury Financial Agent to 3-4537. Payment cancel financial institutions involved resolve issues related	Part I above are the an er, transmitter, or elect son for rejection of the crize the U.S. Treasury account indicated in the all institution to debit the terminate the authorizalation requests must be used in the processing of to the payment. I further transmitters in the processing of the transmitters are the transmitters and the processing of the transmitters are the transmitters.	nounts fronic retransmisted and its of tax preperson. The receipt the electron and the receipt the acceipt the access t	from the inc turn original ssion, (b) th designated paration sof to this acco To revoke (in ved no late dectronic pa	come tax tor (ERO) ne reason Financial tware for bunt. This cancel) a er than 2 syment of that the
Тахра	yer's PIN: check one box on	ly		S		9 9 7	
X] lauthorize GLOBAL TAX	KES LLC	to enter or g	generate mv PIN 🗀			as my
	signature on the income tax	ERO firm name k return (original or amended) I	am now authorizing.			digits, but er all zeros	
		gnature on the income tax return PIN and your return is filed to					
Your s	ignature ►	Mayor linha		Date ► <u>04/13/2024</u>			
Spour	se's PIN: check one box only	,					
Spous	l authorize		to optor or o	generate my PIN			00 m)/
		ERO firm name	to enter or g	, , _	nter five	digits, but	as my
	signature on the income tax	k return (original or amended) I	am now authorizing.			er all zeros	
		gnature on the income tax return PIN and your return is filed u					
Spous	e's signature ►		1	Date ►			
		Practitioner PIN Method Re	turns Only—continu	e below			
Part	Certification and Au	thentication — Practitione	r PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digi	it EFIN followed by your five-di	git self-selected PIN.	2 2 2 4 9 Don't en	6 0	8 2 7	1
				Don't en	tor an Zt	J. 33	
authori	zed to file for tax year indicated	my PIN, which is my signature for above for the taxpayer(s) indicate hod and Pub. 1345 , Handbook for	d above. I confirm that I	am submitting this ref	urn in a	accordance	
ERO's	signature ►		ı	Date ▶			
		ERO Must Retain This F					
	Don't	t Submit This Form to the					

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

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

For the year Jan	ı. 1–C	ec. 31, 2023, or other tax year beginn	ing	, 2023	ending	:	20	See separate instructions.		
	z Jan. 1–Dec. 31, 2023, or other tax year beginning, 2023, ending, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20									
			ructions)							
SHREYASHE	Έ		SINH	A			369-	49-6997		
Home address	numl	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.		
20 NEWPOR	T P	KWY						318		
City, town, or po	ost o	ffice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP code		
JERSEY CI	ΤY					NJ		07310		
Foreign country	nam	е	Foreigr	n province/state/county		Foreign	postal coc	le		
Filing	X	Single	arately (N	MFS) Qualifyi	ng surviving spouse	QSS)	☐ Est	ate 🗌 Trust		
Status		you checked the QSS box, enter the o			son is a child but not	your dep	endent:			
Check only		•								
one box.	•					· ,				
Digital Assets	othe	ny time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f		exchange, or .						
Dependents						(4) Ch	eck the box	if qualifies for (see inst.):		
(see instructions):		(A) F: 1		(2) Dependent's	(0) D	Ch	ild tax credit	Credit for other		
		(1) First name Last name		identifying number	(3) Relationship to yo	ou		dependents		
If more than four										
dependents, see										
instructions and check here										
Income	1a	Total amount from Form(s) W-2, box	1 (see i	netructions)			. la	173,978.		
Effectively	b	Household employee wages not rep	`	,				173,370.		
Connected	C	Tip income not reported on line 1a (s		, ,						
With U.S.	d	Medicaid waiver payments not report		,						
Trade or	e	Taxable dependent care benefits fro								
Business	f	Employer-provided adoption benefit								
Dusiness	g	Wages from Form 8919, line 6		·						
Attach	h	Other earned income (see instruction					. 1h			
Form(s) W-2, 1042-S,	i	Reserved for future use			1i					
SSA-1042-S,	j	Reserved for future use					. 1j			
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from								
here. Also		line 1(e)			1k			150.050		
attach Form(s)	Z	Add lines 1a through 1h	1				. 1z	173,978.		
1099-R if	2a	Tax-exempt interest 2a			xable interest		. 2b	0.		
tax was withheld.		Qualified dividends 3a			dinary dividends .		. 3b	13.		
If you did not	4a 5a	IRA distributions 4a Pensions and annuities 5a			xable amount . . xable amount . .					
get a Form	5a 6	Reserved for future use	_				-			
W-2, see	7	Capital gain or (loss). Attach Schedu						0.		
instructions.	8	Additional income from Schedule 1	•	, ,	•			-12,159.		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8					1	161,832.		
	10	Adjustments to income from Sched		-						
		income	,	**	•		_			
	11	Subtract line 10 from line 9. This is y						161,832.		
	12	Itemized deductions (from Schedu								
		deduction (see instructions)						13,850.		
	13a	Qualified business income deduction	n from F	orm 8995 or Form 8995	-A . 13a					
	b	Exemptions for estates and trusts or	-					Į.		
	С	Add lines 13a and 13b					. 13c			
	14							13,850.		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta	xable income .		. 15	147,982.		

Form 1040-NR (2023)									Page 2
Tax and	16	Tax (see instructions). Check if ar	y from For	rm(s): 1	3 14 2 🗌 497	2 3			16	28,915.
Credits	17	Amount from Schedule 2 (Form	1040), line	3					17	0.
	18	Add lines 16 and 17							18	28,915.
	19	Child tax credit or credit for other	er depende	ents from Sched	ule 8812 (Form 10	40) .			19	
	20	Amount from Schedule 3 (Form	1040), line	8					20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If z	ero or less	s, enter -0					22	28,915.
	23a	Tax on income not effectively co Schedule NEC (Form 1040-NR),				23a				
	b	Other taxes, including self-empl								
		line 21	,	•	,	23b				
	С	Transportation tax (see instruction	ons)			23c				
	d	Add lines 23a through 23c				·			23d	
	24	Add lines 22 and 23d. This is you	ur total ta :	x					24	28,915.
Payments	25	Federal income tax withheld from								<u>, </u>
- c. y	а	Form(s) W-2				25a	32	2,075.		
	b	Form(s) 1099				25b		•		
	С	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c				·			25d	32,075.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments ar							26	
	27	Reserved for future use				27				
	28	Additional child tax credit from S				28				
	29	Credit for amount paid with Forn		,	,	29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Form				31				
	32	Add lines 28, 29, and 31. These	are your t o	otal other paym	ents and refunda	ble cr	edits		32	
	33	Add lines 25d, 25e, 25f, 25g, 26,	and 32. T	hese are your t o	otal payments .				33	32,075.
Refund	34	If line 33 is more than line 24, su	btract line	24 from line 33.	This is the amoun	nt you c	verpaid		34	3,160.
	35a	Amount of line 34 you want refu	nded to y	ou. If Form 8888	3 is attached, chec	k here			35a	3,160.
Direct deposit?	b	Routing number 0 2 1 0	0 0	0 2 1	c Type: 🛛	Check	ing \square	Savings		
See instructions.	d	Account number 7 6 7 9	9 2 1	6 6 8						
	е									
		enter it here.						-		
	36	Amount of line 34 you want app	lied to you	ur 2024 estimat	ed tax	36				
Amount	37	Subtract line 33 from line 24. Th	is is the ar	mount you owe	•					
You Owe		For details on how to pay, go to	www.irs.g	ov/Payments or	see instructions $. $				37	
	38	Estimated tax penalty (see instru	ıctions) .			38				
Third	Do yo	u want to allow another person to	discuss t	his return with th	ne IRS? See instru	ctions.	□ Ye	s. Compl	ete bel	ow. 🛛 No
Party	Desig	nee's		Phone			Persor	nal identifi	cation	
Designee	name			no.			numbe	er (PIN)		
		penalties of perjury, I declare that I hat they are true, correct, and complete. D								
Sign	Your	signature		Date	Your occupation			If the	IRS s	ent you an Identity
Here										PIN, enter it here
					SOFTWARE E	NGIN	EER	(see	inst.)	
	Phone		Drone :-	Email address		Data		DTINI	-	Ob and "
Paid	•	rer's name		's signature		Date	0.1000	PTIN		Check if:
Preparer		1 PRIYA RAM SAGAR GUPTA		PRIYA RAM	SAGAR GUPTA	04/1	2/2024	P02082		Self-employed
Use Only		s name GLOBAL TAXES						Phone no. (678) 965-9522		
	Firm's	address 245 ROONEY C	CT E BE	RUNSWICK N	J 08816			Firm's EIN 84-3171965		

BAA

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

SHREYASHEE SINHA

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.

	Sequence No. 01
Your soc	ial security number
369-49	-6997

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-12,161.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form	,	,	
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	_		
_	Other Income from box 3 of 1099-Misc 2.	8z 2		
9	Total other income. Add lines 8a through 8z		9	2.
10	Combine lines 1 through 7 and 9. This is your additional income . Enter	here and on Form		10 150
	1040, 1040-SR, or 1040-NR, line 8		10	-12,159.

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

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d		_	
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e		_	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h		-	
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect tax law violations	04:			
		24i		-	
j	Housing deduction from Form 2555	24j		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	041-			
_	1041)	24k			
Z	Other adjustments. List type and amount:	24z			
25				25	
25 26	Total other adjustments. Add lines 24a through 24z			25	_
20	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10	. ⊏nter	nere and on	26	
					le 1 (Form 1040) 2023
	BAA	KEV 03/0	07/24 PRO	JUNEUU	ie i (Fulli 1040) 2023

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name shown on Form 1040-NR Your identifying number SHREYASHEE SINHA 369-49-6997 Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income					(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)		
		Nature of income			(a) 10%	(b) 15%	(6) 30%	%	%	
1	Dividends and divide	nd equivalents:								
а	Dividends paid by U.	S. corporations		1a						
b	Dividends paid by fo	reign corporations	1b							
С		ayments received with respect to section 871(m) tra		1c						
2	Interest:									
а	Mortgage			2a						
b		orations	t	2b						
С			t	2c						
3		atents, trademarks, etc.)		3						
4	• "	copyright royalties	4							
5	•	rights, recording, publishing, etc.)	5							
6		e and natural resources royalties	6							
7		es	7							
8		its		8						
9		e 18 below		9						
10	Gambling—Resident									
а	Winnings									
b	Losses			10c						
11	Gambling—Resident Note: Enter winnings	s of countries other than Canada.		11						
12		·								
				12						
13		12 in columns (a) through (d)		13						
14	Multiply line 13 by r	ate of tax at top of each column		14						
15	Tax on income not et	fectively connected with a U.S. trade or business	. Add columr	ns (a) t	hrough (d) of line 14	1. Enter the total here	and on Form 1040	-NR, line 23a 15		
		Capital Gains and	Losses F	rom	Sales or Excha	nges of Proper	ty	<u> </u>		
Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not		(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acqu mm/dd/yyy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).	
	rely connected with a U.S. ss. Do not include a gain									
or loss	on disposing of a U.S. real									
gains a	ty interest; report these nd losses on Schedule D									
(Form 1	•									
	property sales or ges that are effectively									
connec	eted with a U.S. business edule D (Form 1040),									
	1797, or both.	18 Capital gain. Combine columns (f) and (g	g) of line 17.	. Ente	r the net gain here	e and on line 9 abo	ove. If a loss, ente	er -0 18		

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

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

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

Department of the Treasury Internal Revenue Service

Name s	hown on Form 1040-NR		Your identifying number					
SHRI	EYASHEE SINHA				369-49-69			
Α	Of what country or countries w	vere you a citizen or nation	al during the tax y	/ear? INDIA				
В	In what country did you claim	residence for tax purpose	s during the tax y	ear? United States				
С	Have you ever applied to be a	green card holder (lawful p	ermanent resider	nt) of the United States? .		☐ Yes	⊠ No	
D	Were you ever:							
							⊠ No	
2.	A green card holder (lawful per	,				Yes	⊠ No	
_	If you answer "Yes" to (1) or (2							
E	If you had a visa on the last of immigration status on the last of	day of the tax year. $_{\mathbb{F}_{1}}$						
F	Have you ever changed your value of you answered "Yes," indicate					☐ Yes	⊠ No	
G	List all dates you entered and	left the United States durin	g 2023. See instr	uctions.				
	Note: If you're a resident of C				_			
	check the box for Canada or				☐ Mexico			
	Date entered United States	Date departed United Stat	es	Date entered United State		rted Unite	d States	
	mm/dd/yy	mm/dd/yy		mm/dd/yy	- 1	nm/dd/yy		
н	Give number of days (including	vacation, nonworkdavs, and	 d partial davs) vou	were present in the United	States durina:			
	2021	•		•	•			
I	Did you file a U.S. income tax					X Yes	☐ No	
	If "Yes," give the latest year ar	nd form number you filed:		1040NR				
J	Are you filing a return for a trus					☐ Yes	⊠ No	
	If "Yes," did the trust have a l							
	U.S. person, or receive a contr					☐ Yes	□No	
K	Did you receive total compens					∐ Yes	⊠ No	
L	If "Yes," did you use an alterna Income Exempt From Tax—If			•			□ No	
	complete (1) through (3) below	. See Pub. 901 for more in	formation on tax	treaties.			_	
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	eaty benefi	t, and the	
			(b) Tax treaty ar		(d) Am	ount of exe		
	(a) Cou	ntry	(b) rax treaty ar	claimed in prior tax ye		n current ta		
				, , , , , , , , , , , , , , , , , , ,			, , , , , , , , , , , , , , , , , , ,	
	() =	E 4040 NE 11 =						
_	(e) Total. Enter this amount of		-					
	Were you subject to tax in a fo			· •		☐ Yes	□ No ⊠ No	
ა.	Are you claiming treaty benefit If "Yes," attach a copy of the C		-			∐ Yes	△ NO	
М	Check the applicable box if:	Joinpelent Authority determ	imation letter to	your return.				
	This is the first year you are ma	aking an election to treat in	come from real r	property located in the Unit	ed States as ef	fectively o	onnected	
	with a U.S. trade or business u						🗆	
2.	You have made an election in						ne United	
	States as effectively connected							
For Pa	perwork Reduction Act Notice,	see the Instructions for Fo	rm 1040-NR.	REV 03/07/24 PRO	Schedule O	(Form 1040	D-NR) 2023	

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

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**

Your social security number

SH	REYASHEE SINHA			369-	-49-	6997
	rou dispose of any investment(s) in a qualified opportunity					
	es," attach Form 8949 and see its instructions for additiona	al requirements for	r reporting your ga	ain or loss.		
Pa	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year o	or Less (se	e ins	tructions)
lines	nstructions 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	(e) Cost	(g) Adjustmen	from	(h) Gain or (loss) Subtract column (e) from column (d) and
	e dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colum		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					
	Box A checked	10.	10.			0.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	10.	10.			0.
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 (l	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	rusts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise			e any long-	7	0.
Par	t II Long-Term Capital Gains and Losses—Ger	nerally Assets F	Held More Than	One Year	(see i	
See	nstructions for how to figure the amounts to enter on the	(n	()	(g)		(h) Gain or (loss)
This	below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part II,	Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions 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					
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	
	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Sched	dule(s) K-1	12	
	Capital gain distributions. See the instructions				13	
	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions				14	(
15	Net long-term capital gain or (loss). Combine lines 8a	a through 14 in co	olumn (h). Then, go	o to Part III		

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 0. • 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 21 0.) • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

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

2023

Attachment
Sequence No. 12A

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

SHREYASHEE SINHA

Social security number or taxpayer identification number

369-49-6997

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 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 Note below	Adjustment, i If you enter an enter a co	(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).
ROBINHOOD SECURITIES LLC	01/01/23	12/31/23	10.	10.			0.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked) or line 3 (if Box 6).	al here and inc is checked), lir	lude on your ne 2 (if Box B	10	10			0

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

8949

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074 Attachment

Sequence No. 12A

Name(s) shown on return SHREYASHEE SINHA Social security number or taxpayer identification number 369-49-6997

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.

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

-	-			•	Form(s) 1099 If to you on F		sis wasn't report	ed to the IF	RS	
1	(a) Description of property		(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)	
	(Exampl	e: 100 sh. X	YZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)		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).
ROBIN	HOOD	CRYPTO	LLC	01/01/23	12/31/23	10.	10.			0.
negat Sched	ive amo dule D, li	unts). Enter ne 1b (if B o	each tota x A above	s (d), (e), (g), and al here and ince is checked), lin C above is chec	lude on your ne 2 (if Box B	10.	10.			0.

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

SHRE	CYASHEE SINHA						369-	49-6997	
Part	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	ty, use	yalties Schedule	c . See	instru	ctions. If you a	re an inc	lividual, rep	ort farm
	Did you make any payments in 2023 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .							. <u> </u>	es 🗌 No
1a	Physical address of each property (street, city, state, ZIF	ode?	e)						
Α	14 1C, 83 JESSORE ROAD SRIJAN MIDLANDS	S KOI	LKATA	IN 70	0013	2			
В	,								
С									
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental	and	Fair Rental Days			Perso	QJV	
Α	personal use days. Check the Q		365		0				
В	if you meet the requirements to f qualified joint venture. See instru			В					
С		10110110	,.	С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya		-	Self-Rental Other (descr			
						Propertie	es:	1	
Incon				<u> </u>	- 0	В			С
3	Rents received	3		/	50.				
4 Exper	Royalties received	4							
Expei 5		5							
6	Advertising	6							
7	Cleaning and maintenance	7		1,2	65				
8	Commissions	8		1,2	03.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,8	96				
12	Mortgage interest paid to banks, etc. (see instructions)	12		1,0	<i>J</i> 0 •				
13	Other interest	13							
14	Repairs	14		2.4	98.				
15	Supplies	15		3,2					
16	Taxes	16							
17	Utilities	17		3,9	87.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		12,9	11.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21		-12 , 1	61.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(-	12,16	51.)	()()
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		750.		
b	Total of all amounts reported on line 4 for all royalty prop-	erties			23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	12	, 911.		
24	Income. Add positive amounts shown on line 21. Do not		•				. 24		
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lin	e 22. Er	nter to	tal losses here	25	(12 , 161.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this ar						n · 26		-12 , 161.