# Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

## IRS e-file Signature Authorization

► ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID)			
Taxpayer's name	Social security	y number	
ABHISHEK SEHGAL	057-81-	-2460	
Spouse's name	Spouse's soci	ial security number	
DEBASMITA BHAKTA	270-87-	-0484	
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter	er year you ar	re authorizing.)	
Enter whole dollars only on lines 1 through 5.		<u> </u>	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1 Adjusted gross income		<b>1</b>   178,41	7.
2 Total tax		2 23,74	7.
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 22,93	5.
4 Amount you want refunded to you		4	
5 Amount you owe		<b>5</b> 81	2.
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy	y of your return)	
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transr to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the I Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institut authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termina payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recusioness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I all Electronic Funds Withdrawal Consent.	ejection of the tra U.S. Treasury andicated in the tation to debit the tet the authorizar quests must be e processing of payment. I furth	ansmission, (b) the read its designated Finant of the properties of the count. It is not the count of the cou	ason ncial e for This el) a an 2 nt of
Taxpayer's PIN: check one box only			
▼ I authorize GLOBAL TAXES LLC to enter or generate	my PIN	2 4 6 0	my
ERO firm name	Ente	er five digits, but	шу
signature on the income tax return (original or amended) I am now authorizing.	don	n't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN met below.			
Your signature ▶ Date ▶			
Spouse's PIN: check one box only			
▼ I authorize GLOBAL TAXES LLC to enter or generate	, –		my
ERO firm name		er five digits, but n't enter all zeros	
signature on the income tax return (original or amended) I am now authorizing.			1
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN met below.			
Spouse's signature ▶ Date ▶			
Practitioner PIN Method Returns Only—continue below			
Part III Certification and Authentication — Practitioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 0 8 2 7 1 er all zeros	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subracquirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of	mitting this retui	rn in accordance with	

ERO's signature ▶

ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

Date ▶

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



<b>1040</b>		artment of the Treasury-Internal Revenue Servi		urn	20 <b>2</b>	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this spa	ace.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning		·	, 2023, end	ling			, 20		See se	oarate i	instructions	s.
Your first name	and m	iddle initial	Last nar	me							Your so	cial sec	urity numbe	er
ABHISHE	K		SEHG	AL							057	81	2460	
		s first name and middle initial	Last nar	me									security nu	mber
DEBASMI'	ΓA		BHAK	TA							270	87	0484	
		er and street). If you have a P.O. box, see						A	Apt. no.				ection Camp	paign
3200 RI	FLE (	GAP RD						1	428		Check h	nere if y	ou, or your	_
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete s	paces belov	N.	Sta	te	ZIP c	ode		•	_	jointly, wan	
FRISCO						TX	ζ	750	34		•		nd. Checkin not change	•
Foreign countr	y name		F	oreign prov	vince/state/o	count	ty	Foreiç	n postal c		your tax		nd.	
Filing Status		Single  Married filing jointly (even if only or	no had i	ncomo)			Head of h	ouseh	old (HOI	<b>⊣</b> )				
Check only		Married filing separately (MFS)	ne nad ii	ncome)			☐ Qualifying	eurvis	ina eno	usa ((	266)			
one box.	L If √	ou checked the MFS box, enter the	name o	of your end	use If you	ı che	, ,		0 1	,	,	ld'e na	me if the	
		alifying person is a child but not you										iu s na	ile ii tile	
Digital Assets		ny time during 2023, did you: (a) reconange, or otherwise dispose of a dig										□ Ye	es 🗵 No	)
Standard	Som	eone can claim:	pendent	: <u> </u>	our spous	e as	a dependent							
<b>Deduction</b>		Spouse itemizes on a separate retur	n or you	were a dı	ual-status	alien	ı							
Age/Rlindnes	e Vou	: Were born before January 2, 1	959 F	Are blin	d <b>Snc</b>	ouse:	: Was bor	n hefr	ore Janu	an/ 2	1050		s blind	
				Ī	<u> </u>			11					see instructi	ions).
Dependent		irst name Last name		(2) Social security number (3) Relationship to you			lib (	Child t				r other depen		
If more than four	(.,.	Edot namo					. , ,							
dependents,													$\dashv$	
see instruction	s												$\dashv$	
and check here [	1												一	
-	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructio	ons)					<u> </u>	1a		174,55	0.
Income	b	Household employee wages not re	•		,						1b			
Attach Form(s) W-2 here. Also	c	Tip income not reported on line 1a	•	•	•						1c			
attach Forms	d	Medicaid waiver payments not rep	•	,							1d			
W-2G and	e	Taxable dependent care benefits f									1e			
1099-R if tax was withheld.	f	Employer-provided adoption bene									1f			
If you did not	g	Wages from Form 8919, line 6.									1g			
get a Form	h	Other earned income (see instructi	ions) .								1h			0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,	uctions)			1i							
	z	Add lines 1a through 1h						<del>.</del> .			1z		174,55	0.
Attach Sch. B	2a	1	2a			b Ta	axable interes	t.					3,78	
if required.	3a	· —	3a	3	361.	<b>b</b> 0	rdinary divide	nds .			3b		48	84.
	4a	IRA distributions	4a			b Ta	axable amoun	t			4b			
Standard Deduction for—	5a		5a				axable amoun							
Single or	6a	Social security benefits	6a				axable amoun				6b			
Married filing separately,	С	If you elect to use the lump-sum e	lection r	nethod, ch	neck here	(see	instructions)							
\$13,850	7	Capital gain or (loss). Attach Sche	dule D if	required.	If not requ	ıired,	, check here				7		-40	2.
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule	1, line 10	o							8			
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8.	This is you	ır <b>total inc</b>	ome	e				9		178,41	7.
\$27,700	10	Adjustments to income from Sche	dule 1, li	ine 26							10			
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is	your <b>ac</b>	djusted gr	ross incor	ne					11		178,41	7.
\$20,800 If you checked	12	Standard deduction or itemized	deducti	ions (from	Schedule	A)					12		27,70	
any box under	13	Qualified business income deduct	ion from	Form 899	5 or Form	899	5-A				13			3.
Standard Deduction,	14	Add lines 12 and 13									14		27,70	3.
see instructions.	15	Subtract line 1/1 from line 11. If zer	o or loca	ontor O	This is v	our t	tavabla incom				15		150 71	1

Form 1040 (202	3)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	23,747.
Credits	17	Amount from Schedule 2, lin						17	
	18	Add lines 16 and 17						18	23,747.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	•						21	
	22	Subtract line 21 from line 18						22	23,747.
	23	Other taxes, including self-er	•					23	0.
	24	Add lines 22 and 23. This is			•			24	23,747.
Payments	25	Federal income tax withheld							
. aymonto	а	Form(s) W-2				<b>25a</b> 22	,935.		
	b	Form(s) 1099				25b	<u> </u>		
	С	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	•					25d	22,935.
16	26	2023 estimated tax payment						26	, , , , , , ,
If you have a qualifying child,	27	Earned income credit (EIC)		• •		27			
attach Sch. EIC.	28	Additional child tax credit from			_	28			
	29	American opportunity credit				29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin				31			
	32	Add lines 27, 28, 29, and 31.						32	
	33	Add lines 25d, 26, and 32. T						33	22,935.
Refund	34	If line 33 is more than line 24	•					34	,
riciana	35a	Amount of line 34 you want i				•	. 🗆	35a	
Direct deposit?	b	Routing number   X   X   X					avings		
See instructions		Account number X X X							
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24	••						
You Owe	٠.	For details on how to pay, go						37	812.
	38	Estimated tax penalty (see in	_	-		38			
Third Party	Do	you want to allow another	·			See			
Designee		structions	•				mplete b	elow.	<b>⋉</b> No
_		signee's		Phone			nal identifi	cation	
		me		no.			er (PIN)		
Sign		der penalties of perjury, I declare the lief, they are true, correct, and com							
Here			,				1		nt you an Identity
	10	ur signature		Date Your occupation					IN, enter it here
Joint return?					SOFTWARE E	INGINEER	(see ii	nst.)	
See instructions.		ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupati	on			nt your spouse an
Keep a copy for your records.							Identi (see ir		ection PIN, enter it here
,		10111 500 510	•		HOME MAKEF			151.)	
		one no. (214) 609-642		Email address	SEHGAL.A.ABH	ISHEK@GMAIL.CO			Charle if
Paid		eparer's name	Preparer's signat		33 D 0115 = 3	Date	PTIN	700	Check if:
Preparer		M PRIYA RAM SAGAR GUPTA		A RAM SAC	SAR GUPTA	04/10/2024	P02082		Self-employed
Use Only		m's name GLOBAL TAX			- 00016				678) 965-9522
		m's address 245 ROONEY		INSWICK N			Firm's	s EIN	84-3171965
GO TO WWW ITS O	ov/Forr	n1040 for instructions and the late	st information.		DAA	DEV/ 02/07/24 DDO			Form <b>1040</b> (2023)

#### **SCHEDULE B** (Form 1040)

ABHISHEK

### **Interest and Ordinary Dividends**

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

SEHGAL & DEBASMITA

Attach to Form 1040 or 1040-SR. Go to www.irs.gov/ScheduleB for instructions and the la

BHAKTA

	Your	social security number
atest information.		Attachment Sequence No. <b>08</b>
		<b>2023</b>

OMB No. 1545-0074

**Amount** 

057-81-2460

Part I	1	List name of payer. If any interest is from a seller-financed mortgage and the		Amount
Interest		buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:		
(See instructions		DISCOVER BANK		3 <b>,</b> 187
and the Instructions for Form 1040, line 2b.)		Department of the Treasury		598
Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.			1	
	2	Add the amounts on line 1	2	3 <b>,</b> 785
	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3	
	4	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b	4	3,785
	Note:	If line 4 is over \$1,500, you must complete Part III.	-	Amount
Part II	5	List name of payer: Robinhood Securities LLC		62
		FIDELITY		340
Ordinary		FIDELITY		82
Dividends				
(See instructions and the Instructions for Form 1040, line 3b.)			5	
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 dividends shown	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6	484
on that form.		If line 6 is over \$1,500, you must complete Part III.		
Part III Foreign		nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary dnt; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign		
Accounts				Yes No
and Trusts	7-	At any time during 2002, did you have a financial interest in an alerature with with		
Caution: If required, failure to	<i>i</i> a	At any time during 2023, did you have a financial interest in or signature authority of account (such as a bank account, securities account, or brokerage account) located country? See instructions	ed in	
file FinCEN Form 114 may result in substantial penalties. Additionally, you		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See FinC and its instructions for filing requirements and exceptions to those requirements.	CEN F	orm 114
may be required to file Form 8938. Statement of		If you are required to file FinCEN Form 114, list the name(s) of the foreign country(financial account(s) is (are) located:		
Specified Foreign Financial Assets. See instructions.	8	During 2023, did you receive a distribution from, or were you the grantor of, or t foreign trust? If "Yes," you may have to file Form 3520. See instructions	ransfe	eror to, a

#### SCHEDULE D (Form 1040)

#### **Capital Gains and Losses**

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

Attachment Department of the Treasury Sequence No. 12 Go to www.irs.gov/ScheduleD for instructions and the latest information. Internal Revenue Service Name(s) shown on return Your social security number 057-81-2460 ABHISHEK SEHGAL & DEBASMITA BHAKTA Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with 134. 133. 2. 1. Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . . . . . 7 2. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (or other basis) Form(s) 8949, Part II, (sales price) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with 1,585. 28. 1,148. -409. Totals for all transactions reported on Form(s) 8949 with **Box E** checked . . . . . . . . . . . . . . . . 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 5.

14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

-404.

14

15

Schedule D (Form 1040) 2023 Page 2

#### Part III **Summary** -402. 16 Combine lines 7 and 15 and enter the result 16 • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 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 402.) 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 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.

### **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.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment Sequence No. **12A** 

Name(s) shown on return				Social secu	rity number o	r taxpayer identifica	ation number
ABHISHEK SEHGAL & DEBA	ASMITA E	BHAKTA		057-81	-2460		
Before you check Box A, B, or C belo statement will have the same informa broker and may even tell you which b	tion as Form	er you receive 1099-B. Either	ed any Form(s) 109 will show whethe	99-B or substitute er your basis (usua	statement(s ally your cost	s) from your broke t) was reported to	r. A substitute the IRS by your
Part I Short-Term. Trans				eld 1 year or le	ss are ger	nerally short-te	rm (see
instructions). For lo	•	-	. •				
Note: You may agg							
reported to the IRS Schedule D, line 1a							
You must check Box A, B, or C I complete a separate Form 8949, p for one or more of the boxes, com  (A) Short-term transactions (B) Short-term transactions (C) Short-term transactions	below. Checo page 1, for ea aplete as man reported on reported on	k only one bach applicable by forms with Form(s) 1099	box. If more than le box. If you have the same box co g-B showing bas g-B showing bas	one box applied we more short-te whecked as you r wis was reported	s for your s rm transacheed. to the IRS	hort-term transa tions than will fit (see <b>Note</b> above	ctions, on this page
1				(e)	If you enter an	ustment, if any, to gain or loss u enter an amount in column (g),	
(a)	(b) Date acquired	(c) Date sold or	(d) Proceeds	Cost or other basis See the <b>Note</b> below		ode in column (f).  parate instructions.	Gain or (loss) Subtract column (e)
Description of property (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	67.	66.	W	0.	1.
FIDELITY	01/01/23	12/31/23	67.	67.	W	1.	1.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) .

134. 133. 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.

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  ${\tt ABHISHEK} \quad {\tt SEHGAL} \quad \& \quad {\tt DEBASMITA} \quad {\tt BHAKTA}$ 

Social security number or taxpayer identification number 057-81-2460

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.

X	(D)	Long-term transactions reporte	d on Form(s) 109	99-B showing b	asis was reported to	the IRS (se	ee <b>Note</b> above)
П	(E)	Long-term transactions reporte	d on Form(s) 109	9-B showing b	asis wasn't reported	d to the IRS	

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

(i ) Long tonn tranoactions	not roportou	to you on to	1000 B						
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) If you Cost or other basis See the <b>Note</b> below	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f).  See the separate instructions.		If you enter an amount in column (g), enter a code in column (f).  See the separate instructions.  (Gain c		(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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).		
Robinhood Securities LLC	01/01/22	12/31/23	626.	876.			-250.		
FIDELITY	01/01/22	12/31/23	314.	400.	W	28.	-58.		
FIDELITY	01/01/22	12/31/23	208.	309.			-101.		
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)	I here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	1.148.	1.585.		28.	-409.		

**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.

# Form **8995**

Department of the Treasury

Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

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

OMB No. 1545-2294

2023

Attachment Sequence No. **55** 

ARHISHEK SEHGAL & DERASMITA RHAKTA 057-81-2460	number
ABHISHEK SEHGAL & DEBASMITA BHAKTA 057-81-2460	

**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		Qualified business income or (loss)
i				
ii				
iii				
iv				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2		
4 5	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)	4	5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	<b>6</b> 17.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	<b>8</b> 17.		
9	· · · · · · · · · · · · · · · · · · ·		9	3.
10	Qualified business income deduction before the income limitation. Add lines 5 an	1	10	3.
11	Taxable income before qualified business income deduction (see instructions)	11 150,717.	_	
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	<b>12</b> 361.	-	
13	Subtract line 12 from line 11. If zero or less, enter -0	13 150,356.	4.4	20 071
14	Income limitation. Multiply line 13 by 20% (0.20)		14	30,071.
15	the applicable line of your return (see instructions)		15	3.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	( 0.)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a zero, enter -0	nd 7. If greater than	17	( 0.)