(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 numbe	r	
PARESH NAIK		693-63-	-3108		
Spouse's name		Spouse's soci	ial secur	ity number	
Part I Tax Return Information — Tax Year Ending December 31,	2023 (Enter	vear vou ai	re auth	orizina.)
Enter whole dollars only on lines 1 through 5.	2020 (=:::0:	<i>y</i>			<u>'</u>
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1 Adjusted gross income			1	168	,854.
2 Total tax			2	28	,831.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	28	,866.
4 Amount you want refunded to you			4		35.
5 Amount you owe	vou got and k	000 0 000	5 s	ur rotu	rn)
Part II Taxpayer Declaration and Signature Authorization (Be sure Under penalties of perjury, I declare that I have examined a copy of the income tax return (ori					
return (original or amended) I am now authorizing. I consent to allow my intermediate service to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt for any delay in processing the return or refund, and (c) the date of any refund. If applicable, Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institt payment of my federal taxes owed on this return and/or a payment of estimated tax, and the authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Apayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment business days prior to the payment (settlement) date. I also authorize the financial institutior taxes to receive confidential information necessary to answer inquiries and resolve issues personal identification number (PIN) below is my signature for the income tax return (origina Electronic Funds Withdrawal Consent.	or reason for reject I authorize the U.Sution account indiction account indiction account indiction account indiction account indiction requires involved in the pass related to the pass of the pass	ction of the tra S. Treasury are cated in the ta n to debit the the authoriza ests must be processing of ayment. I furti	ansmiss and its de ax prepa entry to ation. To receive the elee her ack	sion, (b) the esignated aration soforevoke (ced no late ctronic parnowledge	e reason Financial tware for unt. This cancel) a r than 2 yment of that the
Taxpayer's PIN: check one box only					
	ter or generate n	av DINI 3	3 1	0 8	ae my
ERO firm name signature on the income tax return (original or amended) I am now authorize	· ·	Ent		igits, but all zeros	as my
I will enter my PIN as my signature on the income tax return (original or a if you are entering your own PIN and your return is filed using the Practit below.	mended) I am no				
Your signature ▶	_ Date ▶ _				
Spouse's PIN: check one box only					
· _	ter or generate n	nv PIN			as my
ERO firm name	nor or goriorato i		er five d	igits, but	ao my
signature on the income tax return (original or amended) I am now authorize	_			all zeros	
I will enter my PIN as my signature on the income tax return (original or a if you are entering your own PIN and your return is filed using the Practit below.					
Spouse's signature ►	Date ►				
Practitioner PIN Method Returns Only—c	ontinue 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. 2 2	2 4 9 6	6 0	8 2 7	1
		Don't ente	er all zer	os	
I certify that the above numeric entry is my PIN, which is my signature for the electronic incauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-	n that I am submi	tting this retu	rn in ac	cordance	
ERO's signature ▶	Date ►				
ERO Must Retain This Form — See Ir					
Don't Submit This Form to the IRS Unless Re	equested To D	o So			

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

£1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta		turn	202	3	OMB No. 1545-	-0074	IRS Use Only	∕—Do not v	vrite or sta	aple in this space.
For the year Jar	ı. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ding			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	ocial sec	curity number
PARESH			NAI	K						693	63	3108
If joint return, s	pouse's	s first name and middle initial	Last r	ame						Spouse	's socia	I security numbe
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				А	pt. no.	Preside	ential Ele	ection Campaigr
_16629 G	ARDEI	N DR								1		ou, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces be	elow.	Sta	te	ZIP co				jointly, want \$3 nd. Checking a
CELINA						T		750		box bel	low will	not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your tax	x or refu	_
Filing Status	; X	Single					Head of ho	ouseho	old (HOH)	•		
Check only		Married filing jointly (even if only o	ne had	l income)								
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spouse	(QSS)		
	lf y	ou checked the MFS box, enter the	name	of your s	pouse. If you	u che	ecked the HOH	l or QS	SS box, ente	er the ch	ild's na	me if the
	qu	alifying person is a child but not you	ır depe	endent:								
Digital		ny time during 2023, did you: (a) rec										
Assets		nange, or otherwise dispose of a dig						t)? (Se	e instructio	ns.)	Y	es 🗵 No
Standard Deduction		neone can claim:	•		-		a dependent					
Age/Blindness	you:	: Were born before January 2, 1	959	Are b	lind Sp o	ouse	: Was bor	n befo	re January 2	2, 1959	l:	s blind
Dependents	s (see	instructions):		(2)	Social security	/	(3) Relationshi	ip (4)	Check the b	ox if qual	ifies for	(see instructions):
If more	(1) F	irst name Last name			number		to you		Child tax c	redit	Credit fo	or other dependents
than four												
dependents, see instruction	s ——											
and check	, —								<u> </u>			
here L											Ц	
Income	1a	Total amount from Form(s) W-2, b	•		•					. 1a		161,945.
Attach Form(s)	b	Household employee wages not re								. 1b	_	
W-2 here. Also	С	Tip income not reported on line 1a			•					. 10		
attach Forms W-2G and	d	Medicaid waiver payments not rep		,	,	nstru	ıctions)			. 10	_	
1099-R if tax	е	Taxable dependent care benefits f			•					. 16		
was withheld.	f	Employer-provided adoption bene	efits fro	m Form 8	3839, line 29					. 1f		
If you did not get a Form	g	Wages from Form 8919, line 6 .								. 10	- 1	
W-2, see	h :	Other earned income (see instruct	,				٠. ٠. ٠. ٠	i ·		. 1h	1	0.
instructions.	i -	Nontaxable combat pay election (s	see ins	structions))		<u>li</u>			4-		161,945.
A#	z 2a	Add lines 1a through 1h Tax-exempt interest	2a		· · i	 h ⁺	axable interest			. 1z	_	<u> </u>
Attach Sch. B if required.		'	2a 3a	2	,801.		axable interest Ordinary divider					2,802.
	3a_	_	4a		,001.		axable amount					2,002.
Standard	4a 5a	_	4 а 5а				axable amount					
• Single or	6a	_	6a				axable amount			. 6b		
Married filing	C	If you elect to use the lump-sum e		method	check here							
separately, \$13,850	7	Capital gain or (loss). Attach Sche				•	,		[7		18,296.
 Married filing jointly or 	8	Additional income from Schedule		•			•					-14,189.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								. 9		168,854.
surviving spouse, \$27,700	10	Adjustments to income from Sche								. 10		,
 Head of household, 	11	Subtract line 10 from line 9. This is								. 11		168,854.
\$20,800	12	Standard deduction or itemized								. 12		13,850.
 If you checked any box under 	<u> 13</u>	Qualified business income deduct					5-A			. 13	_	
Standard Deduction,	14									. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer						e .	<u></u>			155,004.

Form 1040 (2023	3)								Page Z
Tax and	16	Tax (see instructions). Check i	f any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	28,831.
Credits	17	Amount from Schedule 2, line	e3					17	
	18	Add lines 16 and 17						18	28,831.
	19	Child tax credit or credit for c	ther dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, line	98					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	28,831.
	23	Other taxes, including self-er	nployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is y	our total tax					24	28,831.
Payments	25	Federal income tax withheld	from:						
-	а	Form(s) W-2				25a 28	3,866		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c .						25d	28,866.
If you have a	26	2023 estimated tax payments	s and amount a	pplied from 20)22 return			26	
qualifying child,	27	Earned income credit (EIC) .				27			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28			
	29	American opportunity credit t	from Form 8863	8, line 8		29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line	e 15			31			
	32	Add lines 27, 28, 29, and 31.	These are your	total other pa	ayments and refu	ındable credits		32	
	33	Add lines 25d, 26, and 32. Th	nese are your to	tal payments				33	28,866.
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	35.
	35a	Amount of line 34 you want r	efunded to you	ı. If Form 8888	is attached, ched	ck here	🗆	35a	35.
Direct deposit?	b	Routing number 1 1 1	0 0 0 0	2 5	c Type: 🛛	Checking	Savings		
See instructions.	d	Account number 4 8 8	0 4 3 5	6 1 2 7	7 0				
	36	Amount of line 34 you want a	pplied to your	2024 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24.	This is the amo	ount you owe.					
You Owe		For details on how to pay, go	_	-				37	
	38	Estimated tax penalty (see in	structions) .			38			
Third Party		you want to allow another	•			_			
Designee		structions					•		⊠ No
		signee's me		Phone no.			sonal iden ber (PIN)	tification	
Sign	Un	der penalties of perjury, I declare the	at I have examined	d this return and	accompanying sche	dules and statemer	its, and to	the best	of my knowledge and
Here	be	lief, they are true, correct, and comp	olete. Declaration of	of preparer (other	r than taxpayer) is ba	sed on all informat	on of whi	ch prepar	er has any knowledge.
пеге	Yo	ur signature		Date	Your occupation				nt you an Identity
								tection P e inst.)	PIN, enter it here
Joint return? See instructions.		avec's signature. If a joint vature, b	ath mount sing	Dete	SOFTWARE E				mt
Keep a copy for your records.	Sp	ouse's signature. If a joint return, b	oth must sign.	Date	Spouse's occupati	on	Ide		nt your spouse an ection PIN, enter it here
,		(460) 450, 0040		- "		7.00.00 = 7.00		e iiist.)	
		one no. (469)478-9249 eparer's name	Preparer's signat	Email address	PARESHN'/'	7@GMAIL.COI │Data	VI PTIN		Check if:
Paid					AND CITEMA	Date		2772	l —
Preparer		SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/11/2024 P02082							Self-employed
Use Only		m's name GLOBAL TAX		MOMEON AT	T 00016				(678)965-9522
	Fir	m's address 245 ROONEY	CI E BRU	NOWICK NO	J 08816		Fir	n's EIN	84-3171965

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

PARESH NAIK

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.

Your social security number 693-63-3108

t I Additional Income			
Taxable refunds, credits, or offsets of state and local income taxes		1	
Alimony received		2a	
Date of original divorce or separation agreement (see instructions):			
		3	
		4	
		5	-14,189
Farm income or (loss). Attach Schedule F		6	
Unemployment compensation		7	
Other income:			
Net operating loss	8a ()	
Gambling	8b		
Cancellation of debt	8c		
Foreign earned income exclusion from Form 2555	8d ()	
Income from Form 8853	8e		
Income from Form 8889	8f		
Alaska Permanent Fund dividends	8g		
Jury duty pay	8h		
	8i		
	8j		
Stock options	8k		
Income from the rental of personal property if you engaged in the rental			
for profit but were not in the business of renting such property	81		
	8m		
,	8n		
	80		
	8p		
	8r		
	8s ()	
	8t		
Other income. List type and amount:			
	8z		
Total other income. Add lines 8a through 8z		9	
	Taxable refunds, credits, or offsets of state and local income taxes Alimony received	Taxable refunds, credits, or offsets of state and local income taxes Alimony received Date of original divorce or separation agreement (see instructions): Business income or (loss). Attach Schedule C Other gains or (losses). Attach Form 4797 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E Farm income or (loss). Attach Schedule F Unemployment compensation Other income: Net operating loss Gambling Cancellation of debt Foreign earned income exclusion from Form 2555 Bd (Income from Form 8853 Income from Form 8889 Alaska Permanent Fund dividends Jury duty pay Prizes and awards Activity not engaged in for profit income Stock options Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property Olympic and Paralympic medals and USOC prize money (see instructions) Section 951(a) inclusion (see instructions) Section 951(a) inclusion (see instructions) Section 461(i) excess business loss adjustment Taxable distributions from an ABLE account (see instructions) Scholarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan Wages earned while incarcerated Other income. List type and amount: 8z	Taxable refunds, credits, or offsets of state and local income taxes

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

Par	t II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee-				
	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	,	24a		_	
b	Deductible expenses related to income reported on line 8l from the				
		24b		_	
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	· · · · · · · · · · · · · · · · · · ·	24c		_	
d		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		24g			
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h			
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect				
	tax law violations	24i			
j	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k			
Z	Other adjustments. List type and amount:				
		24z			
25	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10	e. Enter	here and on	26	
	·				

SCHEDULE B (Form 1040)

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR.

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

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

Attachment Sequence No. **08**

Your social security number

OMB No. 1545-0074

PARESH NAI	K		693	3-63-3108
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		interest first. Also, show that buyer's social security humber and address.		
and the				
Instructions for Form 1040,				
line 2b.)				
Note: If you received a				
Form 1099-INT, Form 1099-OID,			1	
or substitute				
statement from 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	Excludable interest on series EE and I U.S. savings bonds issued after 1989.		
	4	Attach Form 8815	3	
	4 Note:	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b If line 4 is over \$1,500, you must complete Part III.	4	Amount
	5	List name of payer: 05 CHARLES SCHWAB & CO., INC		2,767
Part II		Robinhood Securities LLC		35
Ordinary				
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	2,802
on that form.	Note:	If line 6 is over \$1,500, you must complete Part III.		_,
Part III	You n	nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary d	livider	nds: (h) had a foreig
Foreign		nt; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign		
Accounts				Vac No
and Trusts	_			Yes No
Caution: If	7a	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 the such as a bank account, securities account, or brokerage account) located the such as a bank account, securities account, or brokerage account) located the such account (such as a bank account, securities account, or brokerage account) located the such account (such as a bank account, securities account, or brokerage account) located the such account (such as a bank account) located the such account (such as a bank account, securities account, or brokerage account) located the such account (such as a bank account) located the such account (such as a bank account) located the such account (such as a bank account) located the such account (such as a bank account) located the such account (such as a bank account) located the such account (such		
required, failure to)	country? See instructions		X
file FinCEN Form 114 may result in		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank		Financial
substantial		Accounts (FBAR), to report that financial interest or signature authority? See Fin0	CEN F	Form 114
penalties. Additionally, you		and its instructions for filing requirements and exceptions to those requirements .		
may be required		If you are required to file FinCEN Form 114, list the name(s) of the foreign country(
to file Form 8938, Statement of		financial account(s) is (are) located:		
Specified Foreign Financial Assets.	8	During 2023, did you receive a distribution from, or were you the grantor of, or t	ranef	eror to a
See instructions.	3	foreign trust? If "Yes," you may have to file Form 3520. See instructions		

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

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

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Go to www.irs.gov/ScheduleD for instructions and the latest information. Internal Revenue Service Name(s) shown on return

Your social security number 693-63-3108 PARESH NAIK 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) Form(s) 8949, Part I, combine the result (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with 2,633. 27. 2,660. Totals for all transactions reported on Form(s) 8949 with Box B checked 15,578. 14,169. 1,409. 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 1,436. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with 48,865. 34,205. 14,660. Totals for all transactions reported on Form(s) 8949 with Box E checked 2,200. 31,229. 29,029. 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14

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

16,860.

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 18,296. • 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? X 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? X 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. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

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.

2023
Attachment
Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return
PARESH NAIK

Department of the Treasury

Social security number or taxpayer identification number

693-63-3108

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

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see 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 transaction	ons not reported	d 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	If you enter an enter a c	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.	
(Example: 100 sh. XYZ Co.)		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).
CHARLES SCHWAB & CO., I	NC 01/01/23	12/31/23	2,660.	2,633.			27.
2 Totals. Add the amounts in colunegative amounts). Enter each Schedule D, line 1b (if Box A at above is checked) at line 2 (if Box Box A)	total here and incove is checked), lin	lude on your ne 2 (if Box B	2 660	2 633			27

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 PARESH NAIK

Social security number or taxpayer identification number 693-63-3108

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☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on	Form(s) 1099)-B showing bas	•		•)
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)
(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	01/01/22	12/31/23	257.	164.			93.
CHARLES SCHWAB & CO., INC	01/01/22	12/31/23	48,608.	34,041.			14,567.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above	al here and inc	lude on your					

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.

above is checked), or line 10 (if Box F above is checked) .

48,865.

14,660.

34,205.

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074 Attachment

Sequence No. 12A

Internal Revenue Service Name(s) shown on return PARESH NAIK

Department of the Treasury

Social security number or taxpayer identification number 693-63-3108

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

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

reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on

(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below			(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).
CHARLES SCHWAB & CO.,INC	01/01/23	12/31/23	15,578.	14,169.			1,409.

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.

15,578.

1,409.

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

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 $PARESH\ NAIK$

Social security number or taxpayer identification number 693-63-3108

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-ter	m tra	nsactions	reported on	Form(s)	1099	-B s	showing	basis	was r	reported	l to	the	IRS	(see Not	t e abo	ve)
 /- \					- ()	4000	_								5 0		

▼ (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

(F) Long-term transactions	not reported	to you on Fc	JIII 1099-D				
(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 a enter a co	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.	
(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).
CHARLES SCHWAB & CO., INC	01/01/22	12/31/23	31,229.	29,029.			2,200.
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 inc is checked), lir	lude on your ne 9 (if Box E	31,229.	29,029.			2,200.

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.

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

OMB No. 1545-0074

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

PAR	ESH NAIK						693-6	3-3108		
Par	Income or Loss From Rental Real Estate Note: If you are in the business of renting personal pro rental income or loss from Form 4835 on page 2, line	perty, use		e C. See	instru	ctions. If you	are an ind	ividual, rep	ort farm	
Α	Did you make any payments in 2023 that would require y		Form(s)	1099? S	See ins	tructions .		. 🗌 Ye	s 🛚 No	
	If "Yes," did you or will you file required Form(s) 1099?									
1a										
A	661/A BEHIND MAHDEV TEMP NANDANGADI			TN 5	8130	4				
<u></u>		J11 101110		11, 3,	3130	-				
1b	Type of Property (from list below) 2 For each rental real estate property above, report the number of f				Fair Rental Days		Personal Use Days		QJV	
A	personal use days. Check the			Α	365		0			
В	if you meet the requirements			В						
С	qualified joint venture. See in	Struction	S.	С						
1	of Property: Single Family Residence 3 Vacation/Short-Term F Multi-Family Residence 4 Commercial	Rental	5 Land 6 Roya			Self-Rental Other (desc				
						Propert	ies:			
Inco				Α		В			С	
3	Rents received			6	13.					
4_	Royalties received	4								
_	nses:	_								
5	Advertising									
6	Auto and travel (see instructions)			1 (10					
7	Cleaning and maintenance	8		1,6	49.					
8 9	Commissions	9								
10	Insurance									
11	Management fees			1,3	10					
12	Mortgage interest paid to banks, etc. (see instructions			1,3	40.					
13	Other interest	<i>'</i>								
14	Repairs			2,1	36					
15	Supplies	15		2,4						
16	Taxes	16								
17	Utilities	17		2,8	94.					
18	Depreciation expense or depletion	18		4,3						
19	Other (list)	19		-						
20	Total expenses. Add lines 5 through 19	20		14,8	02.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). result is a (loss), see instructions to find out if you mufile Form 6198			-14,1	89					
22	Deductible rental real estate loss after limitation, if an on Form 8582 (see instructions)		(14,18		(,)()	
23a	Total of all amounts reported on line 3 for all rental pro	operties			23a		613.			
b		-	·		23b					
С					23c					
d	Total of all amounts reported on line 18 for all propert	ies	23d 4,356.							
е	Total of all amounts reported on line 20 for all propert	ies			23e	14	1,802.			
24	Income. Add positive amounts shown on line 21. Do	not inclu	ıde any lo	sses			. 24			
25	Losses. Add royalty losses from line 21 and rental real es	state loss	es from lir	ne 22. Ei	nter to	tal losses he	re 25	(14,189.)	
26	Total rental real estate and royalty income or (los									
	here. If Parts II, III, and IV, and line 40 on page 2 do Schedule 1 (Form 1040), line 5. Otherwise, include thi						I		-14,189.	

Form **8889**

Health Savings Accounts (HSAs)

Department of the Treasury Internal Revenue Service Go

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

Go to www.irs.gov/Form8889 for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment
Sequence No. 52

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

PARESH NAIK

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. 693-63-3108

Befo	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if	f requ	ired.						
Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for								
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2023. See instructions								
2	HSA contributions you made for 2023 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2023. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	0.						
3	If you were under age 55 at the end of 2023 and, on the first day of every month during 2023, you were, or were considered, an eligible individual with the same coverage, enter \$3,850 (\$7,750 for family coverage). All others , see the instructions for the amount to enter	3	3,850.						
4	Enter the amount you and your employer contributed to your Archer MSAs for 2023 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2023, also include any amount contributed to your spouse's Archer MSAs	4	0.						
5	Subtract line 4 from line 3. If zero or less, enter -0	5	3,850.						
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family								
	coverage under an HDHP at any time during 2023, see the instructions for the amount to enter	6	3,850.						
7	If you were age 55 or older at the end of 2023, married, and you or your spouse had family coverage under an HDHP at any time during 2023, enter your additional contribution amount. See instructions.	7	0.						
8	Add lines 6 and 7	8	3,850.						
9	Employer contributions made to your HSAs for 2023								
10	Qualified HSA funding distributions								
11	Add lines 9 and 10	11	600.						
12	Subtract line 11 from line 8. If zero or less, enter -0	12	3,250.						
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	0.						
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.								
Part	HSA Distributions. If you are filing jointly and both you and your spouse each have separate Part II for each spouse.	arate l	HSAs, complete						
14a	Total distributions you received in 2023 from all HSAs (see instructions)	14a							
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were								
	withdrawn by the due date of your return. See instructions	14b							
C	Subtract line 14b from line 14a	14c							
15	Qualified medical expenses paid using HSA distributions (see instructions)	15							
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f	16							
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here								
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b							
Part									
18	Last-month rule	18							
19	Qualified HSA funding distribution	19							
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f .	20							
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21							