1040)-	NR Department of the Treasury-Inter U.S. Nonresident Al	nal Revenu ien Inc	ue Service come Tax Re	eturn	2023	OMB N	lo. 154	5-0074	or stap)nly—Do no le in this spa	ace.
For the year Jan	ı. 1-	Dec. 31, 2023, or other tax year beginn	ning	, , ,	2023, er	nding		, 2	20		e separat structions	
Your first name			1	Last name You					Your ic	our identifying number ee instructions)		
VIPUL			NAIK						. 444-	-69-0	, 109	
	'nun	ber and street). If you have a P.O. box		ructions.						05 0	Apt. no.	
20427 SPE	•		.,								, .p.:	
		office. If you have a foreign address, al	so comple	ete spaces below.			Stat	e		ZIP co	de	
IRVINE							CA			9261	8	
Foreign country	nar	ne	Foreign	province/state/co	ounty		Fore	eign p	ostal co	de		
Filing Status Check only one box.		Single Married filing separation of the Separation of the Married filing separation of the Separation	child's na	me if the qualifyin	g persor		ot your	depe	Es ndent:	state	🗌 Tru	ıst
Digital Assets	At otł	any time during 2023, did you: (a) recei erwise dispose of a digital asset (or a f	ive (as a r financial ir	eward, award, or nterest in a digital	paymen asset)?	t for property or (See instructions	service s.) .	es); or	(b) sell, 	exchan		No
Dependents							(4) Che	ck the bo	x if qualif	es for (see	inst.):
(see instructions):		(1) First name Last name		(2) Dependent's identifying numb		(3) Relationship to	VOU	Child	I tax crec	11T I -	redit for otl dependent	
				idoninying itamo			you					
If more than four									\square			
dependents, see instructions and												
check here												
Income	1a	Total amount from Form(s) W-2, box	< 1 (see in	structions)					1a		43,83	34.
Effectively	b	Household employee wages not rep	orted on	Form(s) W-2					1b			
Connected	С	Tip income not reported on line 1a (see instru	ictions)					1c			
With U.S.	d	Medicaid waiver payments not repo							1d			
Trade or						1e	_					
Business	f	Employer-provided adoption benefit					• •		1f	-		
Attach	g	Wages from Form 8919, line 6										
Form(s) W-2,	h i	Other earned income (see instruction Reserved for future use							1h			
1042-S, SSA-1042-S,	i	Reserved for future use							1j			
RRB-1042-S, and 8288-A	, k	Total income exempt by a treaty from	m Schedu	ıle OI (Form 1040-	NR), iter				- ''			
here. Also attach	z	line 1(e)							1z		43,83	×Д
Form(s)	2a	Tax-exempt interest 2a				ble interest					40,00	
1099-R if tax was	-a 3a	Qualified dividends 3a				ary dividends .						1.
withheld.	4a	IRA distributions 4a				ole amount						
lf you did not	5a	Pensions and annuities 5a	a 🛛		b Taxab	ole amount			5b			
get a Form W-2, see	6	Reserved for future use							6			
instructions.	7	Capital gain or (loss). Attach Schedu	•								31	11.
	8	Additional income from Schedule 1									-6,06	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8		-							38,08	33.
	10	Adjustments to income from Sched	•	,.		,	-					
	11	Subtract line 10 from line 9. This is y									38,08	33.
	12	Itemized deductions (from Schedu deduction (see instructions)									13,85	50.
	13a	Qualified business income deduction	n from Fo	orm 8995 or Form	8995-A	. 13a						
	b	Exemptions for estates and trusts of	nly (see in	nstructions)		. 13b						
	С	Add lines 13a and 13b							130			
	14										13,85	
	15	Subtract line 14 from line 11. If zero			our taxa	DIE INCOME .			15		24,23	

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

Form 1040-NR (2	2023)		Pa	age 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16 2,68	7.
Credits	17	Amount from Schedule 2 (Form 1040), line 3	17	0.
	18	Add lines 16 and 17	18 2,68	7.
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 1040)	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 zero or less, enter -0	22 2,68	7.
	23a	Tax on income not effectively connected with a U.S. trade or business from		
		Schedule NEC (Form 1040-NR), line 15	_	
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040),		
		line 21	-	
	С	Transportation tax (see instructions)	_	
	d	Add lines 23a through 23c	23d	
	24	Add lines 22 and 23d. This is your total tax	24 2,68	7.
Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	-	
	b	Form(s) 1099	-	
	c	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d 7,29	3.
	е	Form(s) 8805	25e	
	f	Form(s) 8288-A	25f	
	g	Form(s) 1042-S	25g	
	26	2023 estimated tax payments and amount applied from 2022 return	26	
	27	Reserved for future use 27	-	
	28	Additional child tax credit from Schedule 8812 (Form 1040) 28	-	
	29	Credit for amount paid with Form 1040-C	-	
	30	Reserved for future use	-	
	31	Amount from Schedule 3 (Form 1040), line 15		
	32	Add lines 28, 29, and 31. These are your total other payments and refundable credits	32	
<u> </u>	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments	33 7,29	
Refund	34 05-	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34 4,60	
Diverse also a sito	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here $$ Routing number $\begin{vmatrix} 0 & 1 & 1 & 0 & 0 & 0 & 1 & 3 & 8 \end{vmatrix}$ c Type: \square Checking \square Savings	35a 4,60	16.
Direct deposit? See instructions.	b	Routing number 0 1 0 0 1 3 8 c Type: Checking Savings Account number 4 6 6 0 5 8 6 2 9 2 6 Image: Comparison of the com		
	d			
	е	If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here.		
	26	enter it here		
American	36 37	Subtract line 33 from line 24. This is the amount you owe .		
Amount You Owe	57	For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
fou Owe	38	Estimated tax penalty (see instructions)	51	
Third		u want to allow another person to discuss this return with the IRS? See instructions.	olete below. X No	
Party	Desig			
Designee	name		lication	
		penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the	he best of my knowledge a	and
		they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		
Sign	Your	signature Date Your occupation If th	e IRS sent you an Ident	tity
Here			tection PIN, enter it here	e
-		SUPPLY CHAIN ANALYST (see	e inst.)	
	Phon			
Paid	Prepa	rer's name Preparer's signature Date PTIN	Check if:	
Preparer	SYAN	1 PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/01/2024 P0208.	2703 Self-emplo	yed
Use Only	Firm's	s name GLOBAL TAXES LLC Phone r	no. (678)965-952	22
	Firm's	address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E		
Go to www.irs.g	gov/Foi	m1040NR for instructions and the latest information. BAA REV 03/07/24 PRO	Form 1040-NR (2	2023)

SCHEDULE	1
(Form 1040)	

1

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Department of the Treasury

Additional Income and Adjustments to Income

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

way/Farm 1040 far instructions and the late

OMB No. 1545-0074

-6,063.

Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.						
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your so					
TTT DIT NIN TIZ							

	Attachment Sequence No. 01								
our social security number									
11-69	_0109								

VIPUL NAIK 444-69-0109 Part Additional Income 1 2a **b** Date of original divorce or separation agreement (see instructions): 3 4 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 5 Farm income or (loss). Attach Schedule F. 6 7 Unemployment compensation Other income: 8a Gambling 8b b Cancellation of debt 8c С **d** Foreign earned income exclusion from Form 2555 8d Income from Form 8853 8e е Income from Form 8889 8f f Alaska Permanent Fund dividends 8q g 8h i Prizes and awards 8i i 8i 8k L 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 Section 951(a) inclusion (see instructions) 8n n Section 951A(a) inclusion (see instructions) 0 80 p Section 461(I) excess business loss adjustment 8p **q** Taxable distributions from an ABLE account (see instructions) . . . 8q Scholarship and fellowship grants not reported on Form W-2 . . . 8r r Nontaxable amount of Medicaid waiver payments included on Form S 8s t Pension or annuity from a nongualifed deferred compensation plan or a nongovernmental section 457 plan 8t Wages earned while incarcerated 8u u

z	Other income. List type and amount:		
	8z		
9	Total other income. Add lines 8a through 8z	9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form		
	1040, 1040-SR, or 1040-NR, line 8	10	-6,063.

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

Schedule 1 (Form 1040) 2023

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-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)		
b	Deductible expenses related to income reported on line 8I from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m	_	
d	Reforestation amortization and expenses 24d		
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974	_	
f	Contributions to section 501(c)(18)(D) pension plans	-	
g	Contributions by certain chaplains to section 403(b) plans 24g	_	
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	_	
i	Attorney fees and court costs you paid in connection with an award		
	from the IRS for information you provided that helped the IRS detect		
	tax law violations	-	
j	Housing deduction from Form 2555	-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)	-	
Z	Other adjustments. List type and amount:		
05	Tatal athen adjustments. Add lines 04a through 04a	05	
25 06	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	06	
		26	
	BAA REV 03/07/24 PRO	Schedule	1 (Form 1040) 2023

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0074

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

2023 Attachment Sequence No. 7B

Your identifying number

444-69-0109

VIPUL NAIK

Enter **amount of income** under the appropriate rate of tax. See instructions.

Nature of Income			(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)		
		(a) 10%	(b) 15%	(C) 30%	%	%		
1	Dividends and dividend equivalents:							
а	Dividends paid by U.S. corporations		1a					
b	Dividends paid by foreign corporations		1b					
С	Dividend equivalent payments received with respect to section 871(m) trans		1c					
2	Interest:							
а	Mortgage		2a					
b	Paid by foreign corporations		2b					
с	Other		2c					
3	Industrial royalties (patents, trademarks, etc.)		3					
4	Motion picture or TV copyright royalties		4					
5	Other royalties (copyrights, recording, publishing, etc.)		5					
6	Real property income and natural resources royalties		6					
7	Pensions and annuities		7					
8	Social security benefits		8					
9	Capital gain from line 18 below		9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0							
а	Winnings							
b	Losses		10c					
11	Gambling—Residents of countries other than Canada. Note: Enter winnings only. Losses aren't allowed		11					
12	Other (specify):							
			12					
13	Add lines 1a through 12 in columns (a) through (d)		13					
14	Multiply line 13 by rate of tax at top of each column		14					
15	Tax on income not effectively connected with a U.S. trade or business. A						-NR, line 23a 15	
	Capital Gains and Lo	osses F	rom	Sales or Excha	inges of Proper	y		
losses t exchan within t	(if necessary, attach statement of descriptive details not shown below)) Date acqu mm/dd/yyy	uired yy	(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).
	ely connected with a U.S. ss. Do not include a gain							
or loss	on disposing of a U.S. real vinterest; report these							
gains a	nd losses on Schedule D							
(Form 1								
exchan	property sales or ges that are effectively						<u> </u>	
							N /	
	18 Capital gain. Combine columns (f) and (g) c	of line 17	'. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	er-0 18	

SCHEDULE OI (Form 1040-NR)

Department of the Treasury Internal Revenue Service

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
2023
Attachment Sequence No. 7C

Name sl	lame shown on Form 1040-NR Your identifying number							
VIPU	UL NAIK				444-69-02	109		
Α	Of what country or countries v	vere you a citizen or nationa	al during the tax ye	ar? INDIA				
В	In what country did you claim			ar? United States				
С	Have you ever applied to be a	green card holder (lawful p	ermanent resident) of the United States? .		Yes	🛛 No	
D	Were you ever:							
1.	A U.S. citizen?							
2.	A green card holder (lawful pe						🗙 No	
	If you answer "Yes" to (1) or (2							
Е	If you had a visa on the last of immigration status on the last of			ou didn't have a visa, en	-			
F	Have you ever changed your w If you answered "Yes," indicat		,	ation status?		Yes	🗙 No	
G	List all dates you entered and		•					
	Note: If you're a resident of C							
	check the box for Canada or	-			Mexico			
	Date entered United States	Date departed United State	es	Date entered United State		arted United	d States	
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	nm/dd/yy		
			-					
н	Give number of days (including	vacation nonworkdays and		vere present in the United	States during:			
		, 2022,			-			
I	Did you file a U.S. income tax	return for any prior vear? .			······································	X Yes	🗌 No	
	If "Yes," give the latest year ar							
J	Are you filing a return for a true	 st?				🗌 Yes	🔀 No	
	If "Yes," did the trust have a l	J.S. or foreign owner unde	r the grantor trust	rules, make a distribution	n or loan to a			
	U.S. person, or receive a cont					Ves	🗌 No	
Κ	Did you receive total compens					Ves 🗌	🛛 No	
_	If "Yes," did you use an alterna			•			🗌 No	
L	Income Exempt From Tax—If complete (1) through (3) below	. See Pub. 901 for more inf	ormation on tax tre	eaties.	-	-	-	
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	aty benefi	t, and the	
	(a) Cou	ntry	(b) Tax treaty artic	(b) Tax treaty article (c) Number of months claimed in prior tax years			empt ax year	
	(e) Total. Enter this amount o	n Form 1040-NR line 14 D	o not enter it anyw	here else on line 1				
2.	Were you subject to tax in a fo		•		L	Yes	No	
	Are you claiming treaty benefit					☐ Yes	⊠ No	
0.	If "Yes," attach a copy of the C							
м	Check the applicable box if:							
	This is the first year you are m with a U.S. trade or business u			operty located in the Unit		fectively c	onnected	
2.	You have made an election in					cated in th	ے United	
	States as effectively connected							

BAA

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 03/07/24 PRO Schedule OI (Form 1040-NR) 2023

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

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

20Attachment Sequence No. 12

Internal Revenue Service Name(s) shown on return

Department of the Treasury

Your social security number 444-69-0109

VIPUL NAIK

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? × No Yes

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

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

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	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.				37	with column (g)
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	3,311.	3,000.			311.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1					
6						()
7	7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back					311.

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

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) (e) Adjustments Proceeds Cost to gain or loss fr			from Part II,	(h) Gain or (loss) 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			
12 13	Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions		12 13			
	Long-term capital loss carryover. Enter the amount, if any		13			
14	Worksheet in the instructions	-	14	()		
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on the back .						

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

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 311.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 both gains?	
	No. Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. 	
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 (
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	
	BAA REV 03/07/24 PRO	Schedule D (Form 1040) 2023

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.



Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form8949 for instructions and the latest information.

Social security number or taxpayer identification number

Name(s) shown on return VIPUL NAIK

-	
444-69-0109	

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

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

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

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

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

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

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

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	See the separate instruction		(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.			from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/23	12/31/23	3,311.	3,000.			311.
2 Totals. Add the amounts in column negative amounts). Enter each to Schedule D, line 1b (if Box A abov above is checked), or line 3 (if Box	al here and inc e is checked), lir	lude on your ne 2 (if Box B	3,311.	3,000.			311.

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

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

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury Internal Revenue Service

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

)	2023
	Attachment Sequence No. 13

al Revenue Service

) shown on return							al security		
	JL NAIK						444-6	9-0109	9	
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.	d Ro y ty, use	yalties Schedule	C. See	instruc	tions. If you	are an indi	vidual, rep	oort farm	
	Did you make any payments in 2023 that would require you									
B	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Y	es 🗌 No	
1a	Physical address of each property (street, city, state, ZIF									
Α	#14, RAGHAVENDRA COLONY BENGERI HUBBALI	LI IN	1 58002	3						
В										
С										
1b	Type of Property (from list below) 2 For each rental real estate properative above, report the number of fair						Personal Use Days		QJV	
Α	personal use days. Check the Q			Α		365		0		
В	if you meet the requirements to f			B						
	qualified joint venture. See instru	ictions	s	C						
-	of Property:			•						
1	Single Family Residence3 Vacation/Short-Term RenMulti-Family Residence4 Commercial	tal	5 Land 6 Roya		-	Self-Rental Other (desc	ribe)			
						Propert	ies:			
Incon	ne:			Α		В			С	
3	Rents received	3		5	78.					
4	Royalties received	4								
Exper	ISES:									
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		8	75.					
8		8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		1,0	12.					
12	Mortgage interest paid to banks, etc. (see instructions)	12		_, .						
13	Other interest	13								
14	Repairs	14		2,3	32.					
15	Supplies	15		1,4						
16		16		_, _,						
17		17		1,0	01.					
18	Depreciation expense or depletion	18								
19		19								
20	Total expenses. Add lines 5 through 19	20		6,6	41.					
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		-6,0	63.					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(-6,06)	()	
23a	Total of all amounts reported on line 3 for all rental prope				23a		578.			
b	Total of all amounts reported on line 4 for all royalty prop				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	(6 , 641.			
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 tot	al losses he	re 25	(6,063.)	
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 E (Form 1040) 2023

-6,063.

26

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

Form **88889** Department of the Treasury Internal Revenue Service

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

Health Savings Accounts (HSAs)

OMB No. 1545-0074

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

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

ition.	Attachment Sequence No. 52
	ber of HSA beneficiary. HSAs, see instructions.
444-69-	0109

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VIPU	JL NAIK 444-69	-01() 9
Befor	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if	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	X Se	lf-only 🗌 Family
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 9 313.		,
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	313.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	3,537.
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	a separate Part II for each spouse.	rate	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	
с		140 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	

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