Department of the Treasury Calendar Year -Internal Revenue Service

Due 04/18/2022

2022 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**. Write your social security number and '2022' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

715.

REV 03/12/22 PRO 1555

863-50-3454 MANISH JAGDISH PUNJABI

5436 TERRY ST DALLAS TX 75223

Department of the Treasury Calendar Year -Internal Revenue Service

Due 06/15/2022

2022 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**. Write your social security number and '2022' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

715.

REV 03/12/22 PRO 1555

863-50-3454 MANISH JAGDISH PUNJABI

5436 TERRY ST DALLAS TX 75223

Department of the Treasury Calendar Year -Internal Revenue Service

Due 09/15/2022

2022 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**. Write your social security number and '2022' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

715.

REV 03/12/22 PRO 1555

863-50-3454 MANISH JAGDISH PUNJABI

> 5436 TERRY ST DALLAS TX 75223

Department of the Treasury Calendar Year -Internal Revenue Service

Due 01/17/2023

2022 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury**' Write your social security number and '2022' Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

715.

REV 03/12/22 PRO 1555

863-50-3454 MANISH JAGDISH PUNJABI

> 5436 TERRY ST DALLAS TX 75223

Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpay	er's name	Social secur	ity numb	ber				
MAN	ISH JAGDISH PUNJABI	863-50	-3454	4				
Spouse	's name	Spouse's so	cial secu	urity number				
Par	Part I Tax Return Information – Tax Year Ending December 31, 2021 (Enter year you are authorizing.)							
Enter	Enter whole dollars only on lines 1 through 5.							
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income		1	166,534.				
2	Total tax		2	29,353.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	29,428.				
4	Amount you want refunded to you		4	75.				
5	Amount you owe		5					

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	
				ERO firm name		

0	3	4	5	4	
Ent dor	er fiv n't er	/e di nter a	gits, all ze	but ros	as my

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's sign	ature 🕨 🛛 Da	ate 🕨						 		
Practitioner PIN Method Returns Only—continue below										
Part III C	ertification and Authentication – Practitioner PIN Method Only									
ERO's EFIN/P	PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8	7			6 all ze	 9	8	9

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► Date ►							
	ERO Must Retain This Form — See bmit This Form to the IRS Unless						
For Denemicarly Deduction Act Nation and			Earm 8879 (Bay, 01 2021)				

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/12/22 PRO

E1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) urn	202	1	OMB No. 154	45-0074	IRS Use (Only—	Do not w	rite or staple	in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly unchecked the MFS box, enter the name on is a child but not your dependent	ame of y	•	eparately (l Ise. If you d	,			`	<i>,</i> _	_	, 0	ow(er) (QW) ne qualifying
Your first name	e and mi	iddle initial	Last na	me						,	Your so	cial securi	ty number
MANISH	JAGD	ISH	PUNJ	ABI							863-	50-345	4
lf joint return, s	spouse's	s first name and middle initial	Last na	me						:	Spouse'	's social se	curity number
Home address		er and street). If you have a P.O. box, see ST	instructio	ons.					Apt. no.	0	Check ł	nere if you,	,
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete s	paces belo	w.	Stat	e	ZIP	code				ntly, want \$3 Checking a
DALLAS						TX	Ι	75	223		•	ow will not	•
Foreign countr	y name		F	Foreign pro	ovince/state/	count	у	Fore	ign postal co			c or refund.	•
At any time du	uring 20	021, did you receive, sell, exchange,	or othe	rwise dis	pose of an	y fina	ncial interes	t in an	y virtual cu	rreno	cy?	Yes	X No
Standard Deduction		eone can claim: Vou as a de Spouse itemizes on a separate return			•		a dependen	t					
Age/Blindnes	s You:	Were born before January 2, 1	957	Are blir	nd Sp	ouse:	🗌 Was b	orn be	fore Janua	ry 2,	1957	Is bl	ind
Dependent	s (see	instructions):		(2) So	ocial security	/	(3) Relation	ship	(4) 🖌	if qua	alifies fo	r (see instru	ictions):
lf more	(1) Fi	irst name Last name			number		to you		Child tax cred		dit	Credit for ot	her dependents
than four													
dependents, see instruction	C												
and check	3												
here 🕨 🗌													
	1	Wages, salaries, tips, etc. Attach F	orm(s) \	N-2 .							1	1	61,106.
Attach	2a	Tax-exempt interest	2a			b Ta	axable intere	est			2b)	3.
Sch. B if required.	3a	Qualified dividends	3a	(650.	b O	rdinary divic	lends			3b)	993.
	4a	IRA distributions	4a			b Ta	axable amou	unt.			4b)	
	5a	Pensions and annuities	5a			b Ta	axable amou	unt.			5b)	
Standard	6a	Social security benefits	6a			b Ta	axable amou	unt.			6b)	
Deduction for –	7	Capital gain or (loss). Attach Scheo	dule D if	required	. If not requ	uired,	check here		🕨		7	1	23,046.
 Single or Married filing 	8	Other income from Schedule 1, line	e10 .								8	-1	18,614.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8. T	his is you	r total inc	ome				. 🕨	. 9	1	66,534.
 Married filing 	10	Adjustments to income from Sche	dule 1, l	ine 26							10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	your a	djusted g	ross inco	me	· · ·			. 🕨	11	1	66,534.
widow(er), \$25,100	12a	Standard deduction or itemized	leduction or itemized deductions (from Schedule A) 12a 12,550						550				
 Head of 	b	Charitable contributions if you take	the stan	ndard ded	uction (see	instru	uctions) 1	2b		300			
household, \$18,800	с	Add lines 12a and 12b									120		12,850.
 If you checked 	13	Qualified business income deducti	ion from	Form 89	95 or Form	n 8998	5-A				13		3.
any box under <i>Standard</i>	14	Add lines 12c and 13									14		12,853.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lin	e 11. lf ze	ero or less,	enter	r-0				15	1	53,681.
	/												

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

Form **1040** (2021)

	·	1040 for instructions and the late	et information		BAA	REV 03/12/22 PRO			Form 1040 (202
	Firr	n's address 🕨 2530 Pebb	le Creek L	n Cummin	g GA 30041		Firm	's EIN 🕨	30-1017196
Use Only		n's name 🕨 GLOBAL TAX					Phor	ne no. (678)965-9522
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/23/2022	P0208		Self-employed
Paid		parer's name	Preparer's signat			Date	PTIN		Check if:
		one no. (352)871-286		Email address	MANISHPUNJA	BI21@GMAIL.CC			
See Instructions. Keep a copy for your records.		ouse's signature. If a joint return, k		Date	Spouse's occupa		lden (see		nt your spouse an ection PIN, enter it he
Joint return? See instructions.				Data	SOFTWARE		(see	inst.) 🕨	
Here		ur signature		Date	Your occupation		If the	IRS sei	nt you an Identity IN, enter it here
Sign		der penalties of perjury, I declare t ef, they are true, correct, and com		d this return and					
		signee's ne ▶		Phone no. ►			onal identi ber (PIN) 🖡		
Third Party Designee		you want to allow another tructions	•		m with the IRS?		omplete k	below.	× No
You Owe	38	Estimated tax penalty (see in				38			
Amount	37	Amount you owe. Subtract					. 🕨	37	
	36	Amount of line 34 you want a				36			
See instructions.	►d	Account number 8 9 8							
Direct deposit?	►b	Routing number 0 6 3		· · · · · · · · · · · · · · · · · · ·	, L	Checking	Savings		
neruna	35a	Amount of line 34 you want	-		is attached, che	ck here		35a	75.
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	75.
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments		<u>.</u> .	. 🕨	33	29,428.
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments an	d refundable cred	lits 🕨	32	
	31	Amount from Schedule 3, lin				31			
	30	Recovery rebate credit. See		-		30			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	28	Refundable child tax credit or			Schedule 8812	28			
	c	Prior year (2019) earned inco							
	b	Nontaxable combat pay elec							
		January 2, 2004, and you taxpayers who are at least a							
attach Sch. EIC.		Check here if you were b							
qualifying child,	27a	Earned income credit (EIC)				27a			
If you have a	26	2021 estimated tax payment	s and amount a	pplied from 20	20 return .			26	
	d	Add lines 25a through 25c						25d	29,428.
	с	Other forms (see instructions	,			25c			
	b	Form(s) 1099				25b			
	а	Form(s) W-2				25a 29	,428.		
	25	Federal income tax withheld							
	24	Add lines 22 and 23. This is	1 2		,			24	29,353.
	23	Other taxes, including self-e	-					23	0.
	22	Subtract line 21 from line 18						22	29,353.
	21	Add lines 19 and 20						21	
	20	Amount from Schedule 3, lin		-				20	
	19	Nonrefundable child tax cred						19	27,333.
	18	Add lines 16 and 17						18	29,353.
	16	Tax (see instructions). Check						16	29,353.
	17	Amount from Schedule 2, lin						10	<u> </u>

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 20 21 Attachment Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
MANISH JAGDISH PUNJABI	863-50-3454
Part I Additional Income	

1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)			
3	Business income or (loss). Attach Schedule C		3	-118,614.
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, tru Schedule E		5	
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such			
		8k	-	
1	Olympic and Paralympic medals and USOC prize money (see instructions)	81	-	
m	Section 951(a) inclusion (see instructions)	8m	-	
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8р		
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. Enter here and on Form 10 1040-NR, line 8		10	-118,614.
	perwork Reduction Act Notice, see your tax return instructions		<u></u>	

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basic 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	3	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) \blacktriangleright			
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 8k from the rental of personal property engaged in for profit 24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 81 24c			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans 24f			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24h			
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations			
j	Housing deduction from Form 2555			
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 in here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

Page **2**

REV 03/12/22 PRO

SCHEDULE	С
(Form 1040)	

Profit or Loss From Business (Sole Proprietorship)

OMB No.	1545-0074
20	21

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

Department of the Treasury

	. ,	Form	1040, 1040-SK, 1040-NK, 0	1041	; partnerships must generally file			009	uence No	
	of proprietor							curity n		55N)
	ISH JAGDISH PUNJABI					-		0-345		
Α	Principal business or profession	on, inci	uaing product or service (se	e instr	uctions)	В		ode from		
	SOFTWARE SERVICES	1	· · · · · · · · · · · · · · · · · · ·					5 1		
С	Business name. If no separate					D	Employ	er ID num	ber (EIN)	(see instr
	PUNJABI SOFTWARE S				~					
E	Business address (including s	5T 75223								
	City, town or post office, state									
F	0 ()	K Cas			Other (specify) ►					
G					2021? If "No," see instructions for			,	X Yes	∐ No
н			-							_
I					n(s) 1099? See instructions				_	X No
J		e requi	red Form(s) 1099?						Yes	L No
Par	Income									
1	-				this income was reported to you c	1 I				
•	,	• •			d		1			
2	Returns and allowances					· –	2			
3						-	3			
4	-	,				· –	4 5			
5					· · · · · · · · · · · ·	-	-			
6 7	÷ •		-		refund (see instructions)		6 7			
Part	Gross Income. Add lines 5 an		for business use of you	 r hon	<u> </u>		1			
		1			-					E00
8	Advertising	8		18	Office expense (see instructions)		18		2	,500.
9	Car and truck expenses (see		11 704	19	Pension and profit-sharing plans	· 🛏	19			
10	instructions)	9	11,704.	20	Rent or lease (see instructions):		0-			
10	Commissions and fees .	10		a	Vehicles, machinery, and equipme		0a		20	,800.
11	Contract labor (see instructions)	11		b	Other business property		0b		20	,800.
12 13	Depletion	12		21	Repairs and maintenance		21			
10	expense deduction (not			22	Supplies (not included in Part III)		22			
	included in Part III) (see	10		23	Taxes and licenses	· -	23			
	instructions)	13		24	Travel and meals:				2	,000.
14	Employee benefit programs			a		· 🛓	4a		3	,000.
45	(other than on line 19)	14		b	Deductible meals (see				1	000
15	Insurance (other than health)	15		05	instructions)		4b			<u>,800.</u> ,460.
16	Interest (see instructions):	40-		25	Utilities		25		2	,400.
a	Mortgage (paid to banks, etc.)	16a		26	Wages (less employment credits)		26		65	250
b		16b		27a	Other expenses (from line 48) . Reserved for future use		7a		65	,350.
17	Legal and professional services	17	k husingga uga af hama. Add	b			7b		110	,614.
28 29	• •				8 through 27a		28 29			,614.
	,						29		110	,011.
30	unless using the simplified me	-	•	e expe	enses elsewhere. Attach Form 882	9				
	Simplified method filers only			(a) voi	ır home:					
	and (b) the part of your home			(u) you	. Use the Simplified	-				
	Method Worksheet in the inst			er on			30			
31	Net profit or (loss). Subtract					· ⊢				
51	 If a profit, enter on both Sch 			n Cob						
	checked the box on line 1, see						31		-118	,614.
	 If a loss, you must go to lin 		1010110j. L310103 aliu 110818, 6						TT0	,
32	If you have a loss, check the b		at describes your investment	in thic	activity. See instructions					
52										
	 If you checked 32a, enter th SE line 2 (If you checked the 		•		,	2	2a 🛛	All inves	stmont i	s at riel/
	SE, line 2. (If you checked the Form 1041, line 3.	DOX OF	I III E I, SEE LIE III E SI IIISTIUC	10115.)				Some ir		
	 If you checked 32b, you mu 				imited			at risk.		

REV 03/12/22 PRO

Schedu	le C (Form 1040) 2021			Page 2
Part	III Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (atta	ch ex	planation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor If "Yes," attach explanation	γ?	. 🗌 Yes	🗌 No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		
Part				
43 44	When did you place your vehicle in service for business purposes? (month/day/year) $b02/15/201$ Of the total number of miles you drove your vehicle during 2021, enter the number of miles you used your v		e for:	
а	Business 20,900 b Commuting (see instructions) c O	ther		21,150
45	Was your vehicle available for personal use during off-duty hours?		🗌 Yes	🗙 No
46	Do you (or your spouse) have another vehicle available for personal use?		🗙 Yes	🗌 No
47a	Do you have evidence to support your deduction?		🗌 Yes	🗙 No
b	If "Yes," is the evidence written?			No
Part	V Other Expenses. List below business expenses not included on lines 8–26 or line	e 30		
BA	CK OFFICE OPERATIONS EXPENSES			65,350.
48	Total other expenses. Enter here and on line 27a	48		65,350.

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/ScheduleD for instructions and the latest information.
► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

2021 Attachment Sequence No. 12

Internal Revenue Service (99) Name(s) shown on return

Department of the Treasury

MANISH JAGDISH PUNJABI

Your social security number

863-50-3454

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

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
who	e dollars.			line 2, column	ı (g)	with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	312,793.	188,178.		44.	124,659.
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	0.	18,200.			-18,200.
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	usts from	5			
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	6	()			
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	.,		7	106,459.

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmer to gain or loss Form(s) 8949, line 2, colum	s 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	34,612.	18,031.			16,581.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		• •	. ,	11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Sched	dule(s) K-1	12	
13	Capital gain distributions. See the instructions	13	6.			
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	15	16,587.			
For F	Paperwork Reduction Act Notice, see your tax return instruction				Schedu	ile D (Form 1040) 2021

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	123,046.
	• 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? 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 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	1.
20	 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, 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 Forms 1040 and 1040-SR, line 16.		
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

REV 03/12/22 PRO

Schedule D (Form 1040) 2021

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

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

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2021 Attachment Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number
MANISH JAGDISH PUNJABI	863-50-3454

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 disposed of (Mo., day, yr.)	Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a co	any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)			and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment		
FIDELITY	01/01/21	12/31/21	10.	8.			2.	
Robinhood Securities LLC	01/01/21	12/31/21	309,976.	186,532.	W	44.	123,488.	
APEX CLEARING	01/01/21	12/31/21	2,807.	1,638.			1,169.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your 1e 2 (if Box B	312,793.	188,178.		44.	124,659.	

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

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

Form 8949 (2021)	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 MANISH JAGDISH PUNJABI Social security number or taxpayer identification number 863-50-3454

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

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

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

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

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

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

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

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	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.		(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	01/01/20	12/31/21	34,025.	17,753.			16,272.
APEX CLEARING	01/01/20	12/31/21	587.	278.			309.
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	al here and inc is checked), lir	lude on your ne 9 (if Box E	34,612.	18,031.			16,581.

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 **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

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

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2021 Attachment Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number
MANISH JAGDISH PUNJABI	863-50-3454

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

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

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

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

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

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

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

1 (a) Description of property	Date Date	(c) Date sold or	Proceeds S	(e) Cost or other basis. See the Note 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.		n (g), (h) Gain or (loss). Is. 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)			
UMADEVI BALLI - bad debt statement attached	02/05/21	12/01/21	0.	18,200.			-18,200.			
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your 1e 2 (if Box B	0.	18,200.			-18,200.			

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

888 Form Department of the Treasury

Health Savings Accounts (HSAs)

OMB No. 1545-0074 2021

Sequence No. 52

Attachment

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

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

Internal Revenue Service	► Go to www.irs.gov/Form8889 for	r instructions and the latest in
	10 1010 OD 1010 ND	Secial ecou

Name(s) shown on Form 1040. 1040-SR. or 1040-NR	Social security number of HSA
	beneficiary. If both spouses
MANISH JAGDISH PUNJABI	have HSAs, see instructions ► 863-50-3454

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part				ntly
	and both you and your spouse each have separate HSAs, complete a separate Part I for	each	spouse.	
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021.	_	_	
		× Self	-only	Family
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from			
	January 1, 2022, through April 15, 2022, that were for 2021. Do not include employer contributions,			0
-	contributions through a cafeteria plan, or rollovers. See instructions	2		0.
3	If you were under age 55 at the end of 2021 and, on the first day of every month during 2021, you			
	were, or were considered, an eligible individual with the same coverage, enter \$3,600 (\$7,200 for family coverage). All others, see the instructions for the amount to enter	3	З	600.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853,		51	
-	lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, 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,	600.
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 2021, see the instructions for the amount to enter	6	3,	600.
7	If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage			
•	under an HDHP at any time during 2021, enter your additional contribution amount. See instructions	7	2	0.
8 9	Add lines 6 and 7 .	8	3,	600.
9 10	Employer contributions made to your HSAs for 2021 9 3,500. Qualified HSA funding distributions 10	-		
11	Add lines 9 and 10	11	3.	500.
12	Subtract line 11 from line 8. If zero or less, enter -0	12		100.
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		arate H	ISAs, con	nplete
	a separate Part II for each spouse.			
14a	Total distributions you received in 2021 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 withdrawa by the due date of your rature. See instructions	14b		
с	withdrawn by the due date of your return. See instructions	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 8e	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		ions b	efore	
	completing this part. If you are filing jointly and both you and your spouse each have sep			
	complete a separate Part III for each spouse.			
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 8z,			
04	and enter "HSA" and the amount on the dotted line	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.

REV 03/12/22 PRO BAA

Form 8995

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Department of the Treasury Internal Revenue Service

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

2021 Attachment Sequence No. 55

OMB No. 1545-2294

Name(s) shown on return

MANISH JAGDISH PUNJABI

Your taxpayer identification number

863-50-3454

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 \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name ide	(b) Taxpayer ntification number	• • •	Qualified business ncome or (loss)
i				
ii				
iii				
iv				
V				
2	Total qualified business income or (loss). Combine lines 1i through 1v,			
-	column (c)			
3	Qualified business net (loss) carryforward from the prior year)		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	,		
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)			
	(see instructions)	15.		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior			
	year)		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero			
	or less, enter -0	15.		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)	ł	9	3.
10	Qualified business income deduction before the income limitation. Add lines 5 and 9		10	3.
11	Taxable income before qualified business income deduction (see instructions)	153,684.		
12 13	Net capital gain (see instructions) 12 Subtract line 12 from line 11. If zero or less, enter -0- 13	17,237.		
13 14	Income limitation. Multiply line 13 by 20% (0.20)		14	27 200
		+	14	27,289.
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter the applicable line of your return (see instructions)		15	3.
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero,	+	16	(0.)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7.	t	10	0.)
.,	zero, enter -0		17	(0.)
For Pri	vacy Act and Paperwork Reduction Act Notice, see instructions. REV 03/12/22 PR			Form 8995 (2021)

Nonbusiness Bad Debt Explanation Statement

Name(s) MANISH JAGDISH PUNJABI	Social Security Number 863-50-3454
Form/Line:Form 8949L:Explanation of:Nonbusiness Bad Debt	ine 1
Description of debt: LOAN TO UMADEVI BALLI Amount: \$18,200	
Date debt became due: 09/01/2021	
Name of debtor: UMADEVI BALLI	
Relationship to debtor: RELATIVE	
Efforts to collect:	
REACHED SEVERAL TIMES TO COLLECT THE DEBT BUT NOT RESPO	ONDING
Why decided debt was worthless:	
UMADEVI BALLI DECLARED THAT SHE IS INSOLVENT	

Additional information from your 2021 Federal Tax Return

Schedule C (SOFTWARE SERVICES): Profit or Loss from Business

Line 18	Itemization Statement
Description	Amount
PRINTING & STATIONARY	2,500.
Total	2,500.

Schedule C (SOFTWARE SERVICES): Profit or Loss from Business l ine 20h

Line 20b Itemizati		
Description	Amount	
RENT(12M*\$2400PM)	28,800.	
Total	28,800.	

Schedule C (SOFTWARE SERVICES): Profit or Loss from Business

Line 25

Description	Amount
INTERNET(12M*\$70PM)	840.
PHONE BILL(12M*\$55PM)	660.
ELECTRICITY(12M*\$80PM)	960.
Total	2,460.

Itemization Statement