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.

Submission Identification Number (SID)

Taxpay	er's name	Social security number
HAR	SH BHUPENDRAKUMAR SHAH	675-82-5570
Spouse	's name	Spouse's social security number
Part	Tax Return Information – Tax Year Ending December 31, 2022 (Enter	r year you are authorizing.)
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 62,761.
2	Total tax	2 6,579.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 9,411.
4	Amount you want refunded to you	4 2,832.
5	Amount you owe	5

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

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

1 autriorize	ERO firm name		to ontor or generate my rate	Ent	ter
Lauthorize	GLOBAL TAXES	T.T.C.	to enter or generate my PIN		

Ent	as my				
2	5	5	7	0	
	2 Ent	2 5 Enter fiv	2 5 5 Enter five dig	2 5 5 7 Enter five digits, don't enter all ze	2 5 5 7 0 Enter five digits, but don't enter all zeros

signature on	the income t	av roturn	(original c	r amondod)	lamnow	authorizing
Signature on		ax return	(onginal c	n amenueu)	i ann now	authonzing.

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 ent ∯in g yo ∥ r,own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III
below.

Your signature ► ____

X

	Date 🕨
--	--------

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

		as my
er fiv n't er		

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 signature 🕨	Da	ite 🕨	•									
Practitioner PIN Method Returns Only—continue below												
Part III Certification and Authentication –	Practitioner PIN Method Only											
ERO's EFIN/PIN. Enter your six-digit EFIN followed b	y your five-digit self-selected PIN.	2	2					6 all zer	 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 🕨			
	e Instructions Requested To Do So		
For Paperwork Reduction Act Notice, see your tax return	instructions. DAA	REV 02/10/23 PRO	Form 8879 (Rev. 01-2021)

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	2	OMB No. 1545	-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 uchecked the MFS box, enter the nation is a child but not your dependent	ame of y	Ū.	eparately (N use. If you ch		_		· · · ·	spo	lifying surviving use (QSS) name if the qualifying
Your first name	and m	ddle initial	Last na	me						Your so	cial security number
HARSH BH	UPEI	NDRAKUMAR	SHAH							675-	82-5570
lf joint return, sp	ouse's	s first name and middle initial	Last nai	me						Spouse'	s social security numbe
Home address (numbe	er and street). If you have a P.O. box, see	instructio	ons.				A	Apt. no.	Preside	ntial Election Campaigr
1285 DUS	TY I	PINE DR									nere if you, or your
City, town, or po	ost offi	ce. If you have a foreign address, also co	mplete s	paces belo	ow.	Sta	ite	ZIP c	ode		if filing jointly, want \$3 this fund. Checking a
APOPKA						FΙ	-	327	03	•	ow will not change
Foreign country	name		F	oreign pro	ovince/state/c	oun	ty	Foreig	in postal code	your tax	c or refund.
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a									Yes X No
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate return					a dependent	,		,	
		Were born before January 2, 1		Are bli			_	n befo	ore January 2	2, 1958	Is blind
Dependents	(see	instructions):		(2) S	ocial security		(3) Relationsh	ip (4) Check the b	ox if quali	fies for (see instructions):
If more	(1) F	irst name Last name			number		to you		Child tax ci	redit	Credit for other dependents
than four											
dependents, see instructions											
and check											
here 🗌											
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instruct	tions)					. 1a	75,666.
	b	Household employee wages not re	eported	on Form	(s) W-2					. 1b	
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions	s)	•				. 1c	
attach Forms	d	Medicaid waiver payments not rep				Istru	uctions)			. 1d	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom For	m 2441,	line 26 .	•				. 1e	
was withheld.	f	Employer-provided adoption bene	fits from	n Form 88	339, line 29	•				. 1f	
lf you did not	g	Wages from Form 8919, line 6 .				•				. 1g	
get a Form W-2, see	h	Other earned income (see instructi	,				1	· ·		. 1h	0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)			1 i				
	Z	ũ l	1		· · · ·	•		• •		. 1z	,
Attach Sch. B	2a	· ·	2a				axable interest				
if required.	<u>3a</u>		3a				Ordinary divide				
	4a		4a				axable amoun				
Standard Deduction for –	5a		5a				axable amoun				
Single or	6a		6a				axable amoun		· · ·	. 6b	
Married filing separately,	_c	If you elect to use the lump-sum el						• •	L		
\$12,950	7	Capital gain or (loss). Attach Schee						• •	L		-3,000.
 Married filing jointly or 	8	Other income from Schedule 1, line								. 8	-9,905.
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,								. 9	62,761.
\$25,900	10	Adjustments to income from Sche								. 10	
 Head of household, 	11	Subtract line 10 from line 9. This is	-					• •	• • •	. 11	
\$19,400	12	Standard deduction or itemized					 	• •		. 12	
 If you checked any box under 	13 14	Qualified business income deducti Add lines 12 and 13				099	ы-н	• •		. 13	
Standard Deduction,	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer			 Ο ₋ This is vo	יייור	· · · · ·			. <u>14</u> . 15	1
see instructions.	10			5, GHLEF =	o . 1115 15 yt	Jui				. 13	49,811.

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

Form **1040** (2022)

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from Fo	orm(s): 1 🗌 881	4 2 4972	3	[16	6,579.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	6,579.
	19	Child tax credit or credit for other depend	lents from Sched	ule 8812			19	
	20	Amount from Schedule 3, line 8					20	
	21	Add lines 19 and 20				[21	
	22	Subtract line 21 from line 18. If zero or les	ss, enter -0				22	6,579.
	23	Other taxes, including self-employment ta	ax, from Schedul	e 2, line 21		[23	0.
	24	Add lines 22 and 23. This is your total tax	x			[24	6,579.
Payments	25	Federal income tax withheld from:						
	а	Form(s) W-2			25a 9,	411.		
	b	Form(s) 1099			25b			
	с	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	9,411.
	26	2022 estimated tax payments and amoun	nt applied from 20)21 return		[26	
If you have a qualifying child,	27	Earned income credit (EIC)		No	27	Ī		
attach Sch. EIC.	28	Additional child tax credit from Schedule 88			28			
	29	American opportunity credit from Form 88	863, line 8		29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15			31			
	32	Add lines 27, 28, 29, and 31. These are ye	our total other p	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. These are you	=	-		[33	9,411.
Refund	34	If line 33 is more than line 24, subtract line	e 24 from line 33.	. This is the amour	nt you overpaid		34	2,832.
neiuliu	35a	Amount of line 34 you want refunded to	you . If Form 8888	3 is attached, chec	khere	. 🗆 [35a	2,832.
Direct deposit?	b	Routing number 0 4 4 0 0 0	0 3 7		_	avings		
See instructions.	d	Account number 3 6 8 2 3 0	8 6 5			-		
	36	Amount of line 34 you want applied to yo	our 2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the a	amount vou owe					
You Owe		For details on how to pay, go to www.irs.	gov/Payments or	see instructions .			37	
	38	Estimated tax penalty (see instructions)			38			
Third Party	Do	you want to allow another person to o	discuss this retu	rn with the IRS?	See			
Designee		tructions			. 🗌 Yes. Co	mplete be	low.	🗙 No
		signee's	Phone			nal identific	ation [
	nai		no.			er (PIN)		
Sign		der penalties of perjury, I declare that I have exan ef, they are true, correct, and complete. Declarati		1 7 0		,		, ,
Here		ir signature	Date	Your occupation				t you an Identity
	10	a signature	Date	Tour occupation				N, enter it here
Joint return?				SOFTWARE E	INGINEER	(see in	st.)	
See instructions.	Sp	ouse's signature. If a joint return, both must sign	. Date	Spouse's occupation	on			t your spouse an
Keep a copy for your records.						Identit (see in	-	ction PIN, enter it here
,						(000 11	01.)	
		pne no. (929) 446-8440 parer's name Preparer's sig	Email address	HAZ.AU160G		PTIN		Check if:
Paid			,				702	Self-employed
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIY	A KAM SAGAR	GUPTA TALLAM	02/19/2023	P02082		
Use Only		n's name GLOBAL TAXES LLC	DIMONTOR N	T 0001C				678) 965-9522
	Fin	n's address 245 ROONEY CT E B	RUNSWICK N	0 00010		Firm's	EIN	84-3171965
L'o to wayny iro a	ov/Eom	7(14() for instructions and the latest information			DEV/ 00/40/00 DEC			Earm 7 (4) (0000)

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

BAA REV 02/10/23 PRO

Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 2 2

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	Your soc	ial security number	
HARSH BHUPENDR	AKUMAR SHAH	675-82	-5570

Par	t Additional Income							
1	Taxable refunds, credits, or offsets of state and local income taxes		1					
2a	Alimony received	2a						
b								
3	Business income or (loss). Attach Schedule C		3					
4	Other gains or (losses). Attach Form 4797		4					
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-9,905.				
6	Farm income or (loss). Attach Schedule F.		6					
7	Unemployment compensation		7					
8	Other income:							
а	Net operating loss	8a ()					
b	Gambling	8b						
С	Cancellation of debt	8c						
d	Foreign earned income exclusion from Form 2555	8d ()					
е	Income from Form 8853	8e						
f	Income from Form 8889	8f						
g	Alaska Permanent Fund dividends	8g						
ĥ	Jury duty pay	8h						
i	Prizes and awards	8i						
j	Activity not engaged in for profit income	8j						
k	Stock options	8k						
I	Income from the rental of personal property if you engaged in the rental							
	for profit but were not in the business of renting such property	81						
m	Olympic and Paralympic medals and USOC prize money (see							
	instructions)	8m						
n	Section 951(a) inclusion (see instructions)	8n						
ο	Section 951A(a) inclusion (see instructions)	80						
р	Section 461(I) excess business loss adjustment	8p						
q	Taxable distributions from an ABLE account (see instructions)	8q						
r	Scholarship and fellowship grants not reported on Form W-2	8r						
S	Nontaxable amount of Medicaid waiver payments included on Form							
	1040, line 1a or 1d	8s ()					
t	Pension or annuity from a nonqualifed deferred compensation plan or							
	a nongovernmental section 457 plan	8t						
u	Wages earned while incarcerated	8u						
z	Other income. List type and amount:							
		8z						
9	Total other income. Add lines 8a through 8z		9					
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NR, line 8	10	-9,905.				

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

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	e-basi	s gov	ernment		
	officials. Attach Form 2106				12	1
13	Health savings account deduction. Attach Form 8889				13	1
14	Moving expenses for members of the Armed Forces. Attach Form 3903				14	1
15	Deductible part of self-employment tax. Attach Schedule SE				15	1
16	Self-employed SEP, SIMPLE, and qualified plans				16	
17	Self-employed health insurance deduction				17	
18	Penalty on early withdrawal of savings				18	
19a	Alimony paid				19a	
b	Recipient's SSN	•				
С	Date of original divorce or separation agreement (see instructions):					
20	IRA deduction				20	
21	Student loan interest deduction				21	
22	Reserved for future use				22	
23	Archer MSA deduction				23	
24	Other adjustments:					
а	Jury duty pay (see instructions)	24a				
b	Deductible expenses related to income reported on line 8I from the					
	rental of personal property engaged in for profit	24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					
	and USOC prize money reported on line 8m	24c				
d	Reforestation amortization and expenses	24d				
е	Repayment of supplemental unemployment benefits under the Trade					
	Act of 1974	24e			_	
f	Contributions to section 501(c)(18)(D) pension plans	24f				
g	Contributions by certain chaplains to section 403(b) plans	24g				
h	Attorney fees and court costs for actions involving certain unlawful					
	discrimination claims (see instructions)	24h			_	
i	Attorney fees and court costs you paid in connection with an award					
	from the IRS for information you provided that helped the IRS detect					
	tax law violations	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	e. Ente	er here	e and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA	REV	02/10/23 F	RO	Schedu	ile 1 (Form 1040) 2022

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. 2022 Attachment Sequence No. 12

Internal Revenue Service Name(s) shown on return

Department of the Treasury

HARSH BHUPENDRAKUMAR SHAH

Your social security number 675-82-5570

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X 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	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
	e dollars.	(Sales price)		line 2, columr	,	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	244,139.	262,626.	10,9	95.	-7,492.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	12 , 951.	19,914.			-6,963.
3	Totals for all transactions reported on Form(s) 8949 with Box C checked			-6,441.		
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		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	-20,896.		

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) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss fr Form(s) 8949, Pa line 2, column ((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	Net long-term gain or (loss) from partnerships, S corporat	. ,	12 13			
13 Capital gain distributions. See the instructions						
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions						()
45			14	<u>(</u>		
دı 	Net long-term capital gain or (loss). Combine lines 8a on the back	•	.,		15	

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16 -20,	896.
	• 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 (3, 0)00.)
	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.		
	X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

REV 02/10/23 PRO

Schedule D (Form 1040) 2022

Form **8949**

Sales and Other Dispositions of Capital Assets

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.



Social socurity number or taxpayor identification number

Internal Revenue Service Name(s) shown on return

Department of the Treasury

Name(s) shown on return	Social Security number of taxpayer identification number
HARSH BHUPENDRAKUMAR SHAH	675-82-5570

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	(a) (b) Date sold or Proceeds See the Note be		(b) Date sold or Proceeds See the Note belo			f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) and see Colum (see instructions) in the separ instruction		(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	12/31/22	4,182.	4,183.			-1.	
APEX CLEARING	01/01/22	12/31/22	239,957.	258,443.	W	10,995.	-7,491.	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).			244,139.	262,626.		10,995.	-7,492.	

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

8949

Sales and Other Dispositions of Capital Assets

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.



Internal Revenue Service					
Name(s) shown on return					

Department of the Treasury

Name(s) shown on return	Social security number or taxpayer identification number
HARSH BHUPENDRAKUMAR SHAH	675-82-5570

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 Part I 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)

X (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	Date sold or	Date sold or Proceeds Se	(e) Cost or other basis See the Note below	Adjustment, if If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.) (see instructions) in the separ		and see Column (e) in the separate instructions.	(f) (g) Code(s) from instructions adjustment		from column (d) and combine the result with column (g).	
ROBINHOOD CRYPTO LLC	01/01/22	12/31/22	12,951.	19,914.			-6,963.	
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	12,951.	19,914.			-6,963.	

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**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

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.



Social socurity number or taxpayor identification number

Name(s) shown on return

Name(3) shown on return	Social security number of taxpayer identification number
HARSH BHUPENDRAKUMAR SHAH	675-82-5570

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	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate 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) (g) Code(s) from instructions Amount of adjustment		from column (d) and combine the result with column (g).	
APEX	CRYPTO	01/01/22	12/31/22	18,573.	25,014.			-6,441.	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).				18,573.	25,014.			-6,441.	

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 E (Form 1040)		Supplemental Income and Loss									OMB No. 1545-0074						
(Form	1040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)									2022						
Department of the Treasury				Attach to Form 1040, 1040-SR, 1040-NR, or 1041.								Attachment					
					ee for in	stru	tructions and the latest information.							Sequence No. 13			
Name(s) shown on return															cial security number		
HARSH BHUPENDRAKUMAR SHAH 675-82							2-3370										
Fart	Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.																
Α									. 🗌 Ye	es 🛛 No							
B II	f "Yes," did you	or will	you file	e required	Form(s) 10992	?									. 🗌 Ye	es 🗌 No	
1a	Physical addr																
Α	26, HARSI					-		,	.0DTZ		нмғ		ΤN	3800	51		
B				0001011		1010 11			10 D 11				±11	0000	<u>.</u>		
1b	Type of Prope	rty 2	For	each renta	al real estate p	oropertv	list	ted			Fai	ir Rental		Persor	nal Use		
	(from list below		abo	ve, report	the number o	f fair rer	ntal					Days			iys	QJV	
Α	3				days. Check t						365			0			
В					e requirement venture. See i												
С			quu			inou dou			С								
	of Property:																
	Single Family R				n/Short-Term	n Rental		5 Land				Self-Ren					
2	Multi-Family Re	sidence	е	4 Comme	ercial			6 Roya	alties		8	Other (de	escrib	be)			
												Properties:					
Incom	ne:								Α				В			С	
3	Rents received						3			601	•						
4	Royalties rece	ived.					4										
Expen							_										
5	-						5										
6	Auto and trave			,			6			E 4 7							
7 8	Cleaning and r Commissions						7 8		Ζ,	547	•						
о 9	Insurance .						o 9										
10	Legal and othe						0										
11	-						1		1.	685							
12	Management fees					12		,		-							
13	Other interest					1	13										
14	Repairs				1	14		2,	217								
15	Supplies				1	15		1,	695	•							
16	Taxes						6										
17	Utilities					17		2,	362	•							
18	Depreciation e	xpense	e or dep	pletion .			8										
19							19		1.0	FOC							
20	Total expense			-			20		10,	506	•						
21	Subtract line 2 result is a (loss																
	file Form 6198						21		-9,	905							
22 Deductible rental real estate loss after limitation, if any,																	
_	on Form 8582						22	(9,9	05.)()	(
23a	Total of all am	ounts re	eported	d on line 3	for all rental p	oropertie	es			23	3a			601.			
b							ies			23	3b						
С	Total of all amounts reported on line 12 for all properties																
d	1 1																
e	 Total of all amounts reported on line 20 for all properties Income. Add positive amounts shown on line 21. Do no 													506.			
24								-				 tol loopoo	· ·	24	/	0 005	
25																	
26	here. If Parts																

For Paperwork Reduction Act Notice, see the separate instructions.
TO Faperwork neuron Act nouce, see the separate instructions.
• • •

NPA

Form **8889**

Internal Revenue Service

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.

	2022 Attachment Sequence No. 52
m	ber of HSA beneficiary.

Name(s)		Social security nun	nber of						
HARS	lf both spouses ha 675-82-	have HSAs, see instructions. 2-5570							
Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.									
Part	HSA Contributions and Deduction. See the instructions before completing and both you and your spouse each have separate HSAs, complete a separate								
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2022. See instructions								
2	HSA contributions you made for 2022 (or those made on your behalf), including those munextended due date of your tax return that were for 2022. Do not include employer contributions through a cafeteria plan, or rollovers. See instructions	ntributions,	2	0.					
3	If you were under age 55 at the end of 2022 and, on the first day of every month during were, or were considered, an eligible individual with the same coverage, enter \$3,650 family coverage). All others , see the instructions for the amount to enter	(\$7,300 for	3	3,650.					
4	Enter the amount you and your employer contributed to your Archer MSAs for 2022 from lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during include any amount contributed to your spouse's Archer MSAs	2022, also	4	0.					
5	Subtract line 4 from line 3. If zero or less, enter -0	[5	3,650.					
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and coverage under an HDHP at any time during 2022, see the instructions for the amount to end		6	3,650.					
7	If you were age 55 or older at the end of 2022, married, and you or your spouse had fami under an HDHP at any time during 2022, enter your additional contribution amount. See ins		7	0.					
8	Add lines 6 and 7		8	3,650.					
9	Employer contributions made to your HSAs for 2022	60.							
10	Qualified HSA funding distributions . . .								
11	Add lines 9 and 10		11	60.					
12	Subtract line 11 from line 8. If zero or less, enter -0		12	3,590.					
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Pa Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instruction		13	0.					
Part	HSA Distributions. If you are filing jointly and both you and your spouse eac		ate F	ISAs, complete					
	a separate Part II for each spouse.								
14a	Total distributions you received in 2022 from all HSAs (see instructions)		14a						
b	Distributions included on line 14a that you rolled over to another HSA. Also include a contributions (and the earnings on those excess contributions) included on line 14a withdrawn by the due date of your return. See instructions	that were	14b						
с	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, amount in the total on Schedule 1 (Form 1040), Part I, line 8f	include this	16						
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Addition Tax (see instructions), check here								
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on are subject to the additional 20% tax. Also, include this amount in the total on Schedu 1040), Part II, line 17c	ule 2 (Form	17b						
Part				efore					
	completing this part. If you are filing jointly and both you and your spouse eacomplete a separate Part III for each spouse.	ch have sepa							
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,		20						
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Sched								
	1040), Part II, line 17d		21	- 0000 (

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

BAA REV 02/10/23 PRO