Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

Submission Identification Number (SID)			
Taxpayer's name	Social security	y number	
MUBASHIR T MOHAMMED	855-86-		
Spouse's name	1 '	al security numl	per
FATIMAH MAHMOOD ALI	987-91-		
	er year you ar	e authorizin	g.)
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.			27 200
1 Adjusted gross income		2	57,300. 4,560.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	9,818.
4 Amount you want refunded to you		4	5,258.
5 Amount you owe		5	<u> </u>
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy	of your re	turn)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amende my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abore turn (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termina payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation rebusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I Electronic Funds Withdrawal Consent.	ove are the amomitter, or electroniter, or electronic the transition of the transition to debit the authorizated in the authorizated in the authorizated processing of payment. I furtile	nunts from the nic return original return original return original return to the sentry to this action. To revoke received no lethe electronic return acknowled	income tax nator (ERO) the reason ed Financial software for count. This e (cancel) a ater than 2 payment of lge that the
Taxpayer's PIN: check one box only			٦
X I authorize GLOBAL TAXES LLC to enter or generate ERO firm name	ř Ent	5 8 3 2 er five digits, bu ''t enter all zeros	d 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 if you are entering your own PIN and your return is filed using the Practitioner PIN met below.			
Your signature ► Date ►			
Spouse's PIN: check one box only I authorize GLOBAL TAXES LLC ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	6 6 4 5 er five digits, bu	t as,
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.			
Spouse's signature ▶ Date ▶			
Practitioner PIN Method Returns Only—continue below Part III Certification and Authentication — Practitioner PIN Method Only	N		
		2 3 1 9 er all zeros	8 9
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sub requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of	mitting this retu	rn in accordan	ice with the
ERO's signature ▶ Date ▶			
ERO Must Retain This Form — See Instructions			

Don't Submit This Form to the IRS Unless Requested To Do So

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

2022

OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space.

	S 🗌 S	Single X Married filing jointly [Marrie	ed filing separate	ly (MFS)	☐ Head of	house	ehold (HOF	l) 🗌		lifying surv use (QSS)	viving
Check only one box.	If vo	u checked the MFS box, enter the r	name of v	vour spouse. If vo	u check	ed the HOH or	r QSS	box, ente	r the c		, ,	e qualifvir
		on is a child but not your dependen		,				,				, ,, ,
Your first name	and mi	ddle initial	Last na	ıme					Yo	our so	cial securit	y number
MUBASHIE	R T		MOHA	AMMED					8	55-8	36-5832	2
		first name and middle initial	Last na	ıme					Sp	ouse'	s social sec	urity numb
FATIMAH			MAHM	MOOD ALI					9	87-9	91-6645	5
Home address	(numbe	er and street). If you have a P.O. box, see	e instructi	ons.				Apt. no.			ntial Election	
5406 LAN	IDMAF	RK CIR									nere if you,	
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete s	spaces below.	Sta	te	ZIP	code			if filing join this fund.	
MOUNDS V	/IEW				MN	1	551	112			ow will not	
Foreign country	/ name			Foreign province/st	ate/count	ty	Forei	gn postal co	de yo	our tax	or refund.	Ü
											You	Spous
Digital	At an	ny time during 2022, did you: (a) red	ceive (as	a reward, award,	, or payr	ment for prope	erty or	services);	or (b)	sell,		
Assets	exch	ange, gift, or otherwise dispose of	a digital	asset (or a finance	cial intere	est in a digital	asset)? (See ins	struction	ons.)	Yes	⊠ No
Standard	Som	eone can claim:	ependen	t 🗌 Your sp	ouse as	a dependent						
Deduction		Spouse itemizes on a separate retu	rn or you	u were a dual-sta	tus alien	ı						
Age/Blindness	You:	☐ Were born before January 2,	1958	Are blind	Spouse	: Was bo	rn bef	ore Janua	ry 2, 1	958	☐ Is bli	ind
Dependents	s (see	instructions):		(2) Social sec	uritv	(3) Relationsh	ain (4) Check th	e box i	f qualif	fies for (see	instructions
If more		rst name Last name		number		to you		Child ta	x credi	t	Credit for oth	ner depender
than four												
dependents,												5
see instructions and check	s ——											
here												
Income	1a	Total amount from Form(s) W-2, k	oox 1 (se	e instructions)						1a	7	77,500.
meome	b	Household employee wages not r	reported	on Form(s) W-2						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1	a (see in:	structions) .						1c		
attach Forms	d	Medicaid waiver payments not re	ported o	n Form(s) W-2 (se	ee instru	ictions)				1d		
W-2G and	е	Taxable dependent care benefits	from Fo	rm 2441, line 26						1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene	efits fron	n Form 8839, line	29 .					1f		
If you did not	g	Wages from Form 8919, line 6 .								1g		
get a Form	h	Other earned income (see instruc-	tions)				٠, .			1h		0.
W-2, see instructions.	i	Nontaxable combat pay election	(see insti	ructions)		<u>1</u> i	i					
	Z	Add lines 1a through 1h	1. 1							1z	7	77 , 500.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	it .			2b		
if required.	3a	Qualified dividends	3a		b C	rdinary divide	nds .			3b		0.
	4a	IRA distributions	4a		b T	axable amoun	nt			4b		
Standard	5a	Pensions and annuities	5a			axable amoun				5b		
Deduction for— Single or	6a	Social security benefits	6a			axable amoun	nt			6b		
Married filing separately,	С	If you elect to use the lump-sum			•				. 📙			
\$12,950	7	Capital gain or (loss). Attach Sche		•	•				. Ц	7		-3 , 000.
Married filing jointly or	8	Other income from Schedule 1, lir								8		-7 , 200.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-						9		57 , 300.
\$25,900	10	Adjustments to income from Sche	•							10		
Head of household,	11	Subtract line 10 from line 9. This i	•	-						11		57 , 300.
\$19,400	12	Standard deduction or itemized		•	,					12		25 , 900.
If you checked any box under	13	Qualified business income deduc								13	_	
Standard Deduction,	14	Add lines 12 and 13								14		25,900.
see instructions.	15	Subtract line 14 from line 11. If ze	ero or les	s, enter -U This	is your t	axable incom	ne .			15		11,400.

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any	from Form(s): 1 8814	4 2 4972	3 🗌		. 16	4,560.
Credits	17	Amount from Schedule 2, line 3						
	18	Add lines 16 and 17					. 18	4,560.
	19	Child tax credit or credit for other	dependents from Schedu	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 zer	o or less, enter -0				. 22	4,560.
	23	Other taxes, including self-employ	ment tax, from Schedule	2, line 21 .			. 23	0
	24	Add lines 22 and 23. This is your to	otal tax				. 24	4,560.
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2			25a	9,81	L8.	
	b	Form(s) 1099			25b			
	С	Other forms (see instructions) .			25c			
	d	Add lines 25a through 25c					. 25d	9,818.
If you have a	26	2022 estimated tax payments and	amount applied from 20	21 return			. 26	
If you have a qualifying child,	27	Earned income credit (EIC)			27			
attach Sch. EIC.	28	Additional child tax credit from Sche	edule 8812		28			
	29	American opportunity credit from I	Form 8863, 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. Thes	e are your total other pa	yments and ref	undable cred	lits .	. 32	
	33	Add lines 25d, 26, and 32. These a	re your total payments				. 33	9,818.
Defined	34	If line 33 is more than line 24, subt						5,258.
Refund	35a	Amount of line 34 you want refund			•			5,258.
Direct deposit?	b	Routing number 0 9 1 0 0		c Type:		Savii		
See instructions.	d	Account number 2 8 3 8 9				_		
	36	Amount of line 34 you want applie	d to your 2023 estimate	d tax	36			
Amount	37	Subtract line 33 from line 24. This						
You Owe	0.	For details on how to pay, go to w	ww.irs.gov/Payments or				. 37	
	38	Estimated tax penalty (see instruct	ions)		38			
Third Party Designee		you want to allow another personant structions	on to discuss this retur			s. Compl	ete below.	X No
		signee's	Phone				dentification	
		me	no.			number (F		
Sign		der penalties of perjury, I declare that I hat ief, they are true, correct, and complete. I						
Here	Yo	ur signature	Date	Your occupation		1	If the IRS se	nt you an Identity
		3						IN, enter it here
Joint return?				NETWORK 2	ARCHITEC	Т	(see inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both m	ust sign. Date	Spouse's occupat	ion			nt your spouse an ection PIN, enter it here
your records.				HOUSE WIF	2		(see inst.)	ection Pilv, enter it here
		one no. (425) 633-7938	Email address	MUBASHIR2		COM	,	
			rer's signature	NODASHIKZ.	Date	PTI	N	Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM SYAM	· ·	בווסיים יים ד. ד.מ או			2082703	Self-employed
Preparer		m's name GLOBAL TAXES		OOLIA IAHIAN	103/23/20	23 102		(678) 965-9522
Use Only			E BRUNSWICK NO	T 08816			Firm's EIN	
0-1	1 III	a1040 for instructions and the late 1.15	T DIVOLADAATOR INC	00010			I IIIII 3 LIIN	84-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number MUBASHIR T MOHAMMED & FATIMAH MAHMOOD ALI 855-86-5832 Part | Additional Income 1 1 2a Date of original divorce or separation agreement (see instructions): 3 3 4 4 -7,200. 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E . . 5 6 6 7 7 8 Other income: 8a а 8b 8c Foreign earned income exclusion from Form 2555 8d 8e Income from Form 8889 8f Alaska Permanent Fund dividends 8g 8i Activity not engaged in for profit income 8i 8k Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property . . . 81 m Olympic and Paralympic medals and USOC prize money (see 8m 8n Section 951A(a) inclusion (see instructions) 80 Section 461(I) excess business loss adjustment 8p Taxable distributions from an ABLE account (see instructions) . . . 8q

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

8r

8s

8t

8u

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

u Wages earned while incarcerated

9

Scholarship and fellowship grants not reported on Form W-2 . . .

Other income. List type and amount:

Schedule 1 (Form 1040) 2022

-7,200.

9

10

Schedule 1 (Form 1040) 2022 Page **2**

Par	II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b			
	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	, ,, ,, , , , , , , , , , , , , , , ,	4a		
b	Deductible expenses related to income reported on line 8l from the			
		4b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	·	4c		
d		4d		
е	Repayment of supplemental unemployment benefits under the Trade			
		4e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	4g		
h	Attorney fees and court costs for actions involving certain unlawful			
	,	4h		
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			
		24i	_	
J		24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	41-		
_	,	4k	_	
Z	Other adjustments. List type and amount:	4z		
25			05	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . E		26	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u> </u>		

SCHEDULE D (Form 1040)

Capital Gains and Losses

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.

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

MUBASHIR T MOHAMMED & FATIMAH MAHMOOD ALI

Your social security number 855-86-5832

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.

(d) (e) (h) Gain or (loss)
Subtract column (e)

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 le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F line 2, column	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result 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	518,407.	568,491.	22,2	04.	-27,880.
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 (l	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	(50,093.)
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis	•	. ,		7	-77,973.

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

See instructions for how to figure the amounts to enter on the lines below.		(d) (e) Proceeds Cost to		(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, Part II, line 2, column (g)		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 corporate	12				
13	Capital gain distributions. See the instructions	13				
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	14	(38.)			
15	Net long-term capital gain or (loss). Combine lines 88 on the back	15	-38.			

BAA

Schedule D (Form 1040) 2022 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 -78,011. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 3,000.) • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074 Attachment

Social security number or taxpayer identification number

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

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

Sequence No. 12A

MUBASHIR T MOHAMMED & I	FATIMAH M	AHMOOD A	LI	855-86	-5832		
Before you check Box A, B, or C belo statement will have the same informa broker and may even tell you which b	tion as Form						
Part I Short-Term. Trans instructions). For lo				eld 1 year or le	ss are ger	nerally short-te	rm (see
Note: You may agg reported to the IRS	regate all s and for wh	hort-term tr ich no adjus	ansactions rep stments or cod	es are required	d. Enter th	e totals directly	/ on
Schedule D, line 1a You <i>must</i> check Box A, B, <i>or</i> C I		<u> </u>	<u> </u>			`	
complete a separate Form 8949, p for one or more of the boxes, com	page 1, for ea	ach applicabl	le box. If you hav	e more short-te	rm transac		
▼ (A) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	sis was reported	to the IRS	•	e)
☐ (B) Short-term transactions☐ (C) Short-term transactions			-	sis wasn't report	ed to the IF	RS	
1 (a)	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) (d) Cost or other basis		if any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
Description of property (Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	518,407.	568,491.	W	22,204.	-27 , 880.
2 Totals. Add the amounts in columns	s (d), (e), (g), and	d (h) (subtract					

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.

518,407.

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).

568,491.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

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

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

Attachment Sequence No. 13

Your social security number

OMB No. 1545-0074

MUBA	ASHIR T MOHAMMED & FATIMAH MAHMOOD ALI						855-8	6-5832	
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.			c . See	instru	ctions. If you	are an indiv	ridual, rep	ort farm
	Did you make any payments in 2022 that would require you ff "Yes," did you or will you file required Form(s) 1099?								
_	Physical address of each property (street, city, state, ZIF			• •	• •				.5 <u> 110</u>
1a									
Α	2-5-788, ALIPURAH, SUBEDAR WARANGAL TE	ELANG	GANA IN	1 5060	001				
В									
С					ı		T		
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair real estate properabove.	and		Fa	ir Rental Days	Person Da		QJV	
Α	g personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	qualified joint venture. Gee institu	action ic	,.	С					
Гуре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Ren	ıtal	5 Lanc	d		Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
						Propert			
ncon	201			Α		В	163.		С
3	Rents received	3			50.	В			<u> </u>
4	Royalties received	_			50.				
	1Ses:	4							
zpei 5	Advertising	5							
6	Auto and travel (see instructions)	6		7	50.				
7	Cleaning and maintenance	7		/	50.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		9	50.				
12	Mortgage interest paid to banks, etc. (see instructions)	12			50.				
13	Other interest	13							
14	Repairs	14		2 4	50.				
15	Supplies	15			50.				
16	Taxes	16		±, J	50.				
17	Utilities	17		1,5	5.0				
18	Depreciation expense or depletion	18		1/5	.				
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		7,6	5.0				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If			,, ,					
21	result is a (loss), see instructions to find out if you must file Form 6198	21		-7, 2	00.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(7,20		()	(
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		450.		
b	Total of all amounts reported on line 4 for all royalty prop	erties			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		7,650.		
24	Income. Add positive amounts shown on line 21. Do no	t inclu	ide any lo	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estat		-		nter to	otal losses he	re 25	(7,200.
26	Total rental real estate and royalty income or (loss).	Comb	ine lines	24 and	25. E	nter the resi	ult		
	here. If Parts II, III, IV, and line 40 on page 2 do not Schedule 1 (Form 1040), line 5. Otherwise, include this ar	apply	to you,	also er	nter th	nis amount o			-7,200.

Form **4952**

Investment Interest Expense Deduction

Go to www.irs.gov/Form4952 for the latest information.

Attach to your tax return.

OMB No. 1545-0191

2022

Attachment
Sequence No. 51

Identifying number

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

MUBASHIR T MOHAMMED & FATIMAH MAHMOOD ALI 855-86-5832 Part I **Total Investment Interest Expense** 1 Investment interest expense paid or accrued in 2022 (see instructions) 1 60. Disallowed investment interest expense from 2021 Form 4952, line 7 2 2 3 **Total investment interest expense.** Add lines 1 and 2 3 60. Part II **Net Investment Income** Gross income from property held for investment (excluding any net gain from 0. 4a 4b 0. 4c Net gain from the disposition of property held for investment 4d Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions 4e 4f 0. Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 4h 0. 5 **Net investment income.** Subtract line 5 from line 4h. If zero or less, enter -0- 6 6 0. Part III **Investment Interest Expense Deduction** Disallowed investment interest expense to be carried forward to 2023. Subtract line 6 from line 7 60. 8 **Investment interest expense deduction.** Enter the **smaller** of line 3 or line 6. See instructions 0. For Paperwork Reduction Act Notice, see page 4. Form **4952** (2022) BAA REV 03/18/23 PRO





2022 Form M1, Individual Income Tax Do not use staples on anything you submit.

	ASHIR T st Name and Initial	MOHAMMED Last Name	855865832 Your Social Security Numl	Der 02261991 Your Date of Birth (MM/DD/YYYY		
	MAH Return, Spouse's First Name and Initi	MAHMOOD AL Spouse's Last Name	987916645 Spouse's Social Security Nu	10121995 Spouse's Date of Birth		
5406	5 LANDMARK CIR Home Address		Check if Address is:	New Foreign		
	NDS VIEW		MN State	55112 ZIP Code		
•	Federal Filing Status (place an X in one box):				
(1) Single (2) Married Filing Jo	Spouse Name	()	sehold (5) Qualifying Widow(er		
Depe	endents (see instructio	Spouse SSN ns):				
Depend	ent 1 First Name	Dependent 1 Last Name	Dependent 1 SSN	Dependent 1 Relationship to You		
Depend	ent 2 First Name	Dependent 2 Last Name	Dependent 2 SSN	Dependent 2 Relationship to You		
Depend	ent 3 First Name	Dependent 3 Last Name	Dependent 3 SSN	Dependent 3 Relationship to You		
	Your Federal Return (s	0	C Unemployment	41400		
A. Wag	es, salaries, tips, etc.	3. IRA, pensions, and annuities	C. Unemployment	D. Federal taxable income		
1	Federal adjusted gross incom	ne (from line 11 of federal Form 104	0 and 1040-SR)	1 ■67300		
2	Additions to income from line	e 10 of Schedule M1M and line 9 of	Schedule M1MB (see instructions)	2		
3	Add lines 1 and 2			3 67300		
4	Itemized deductions (from So	chedule M1SA) or your standard de	duction (see instructions)	4■25800		
5	Exemptions (determine from	instructions)		5 🔳		
6	State income tax refund from	line 1 of federal Schedule 1		6■		
7	Subtractions from line 32 of S	Schedule M1M and line 21 of Sched	ule M1MB (see instructions)	7 =		
8	Total subtractions. Add lines	4 through 7		825800		
9	Minnesota taxable income. S	Subtract line 8 from line 3. If zero or	less, leave blank.	9 41500		
10	Tax from the table or schedul	es in the Form M1 instructions		102230		

2022 M1, page 2



11	Alternative minimum tax (enclose Schedule M1MT)		11 -	
11	Alternative minimum tax (enclose schedule MIMT)		.11	
	Add lines 10 and 11	. Skip lines 13a and 13b.	.12	2230
	line 13, from line 28 on line 13a, and from line 29 on line 13b		13	2230
	13a ■ O13b ■			
14	Other taxes, such as recapture amounts and the tax on lump-	_ sum distributions (check appropriate boxes)		
	(a) Schedule M1HOME (b) Schedule M1529	(c) Schedule M1LS	14 ■	
15	Tax before credits. Add lines 13 and 14		15	2230
16	Amount from line 19 of Schedule M1C, Nonrefundable Credits	s (enclose Schedule M1C)	16 ■	
17	Subtract line 16 from line 15 (if result is zero or less, leave bla	nk)	17	2230
18	Nongame Wildlife Fund contribution (see instructions) This will reduce your refund or increase the amount you owe		18 ■	
19	Add lines 17 and 18		19	2230
20				2006
	Minnesota withholding from Forms W-2, 1099, and W-2G and S	chedules KPI, KS, and KF	20 ■	3986
21	Minnesota estimated tax and extension payments made for 2	022	21 ■	
22	Amount from line 12 of Schedule M1REF, Refundable Credits	(see instructions; enclose Schedule M1REF)	22 ■	
23	Total payments. Add lines 20 through 22		23	3986
24	REFUND . If line 23 is more than line 19, subtract line 19 from For direct deposit, complete line 25		24 ■	1756
25	Direct deposit of your refund (you must use an account not a			
	X Checking Savings 09100001			
	Routing Number	Account Number		
	AMOUNT YOU OWE . If line 19 is more than line 23, subtract I Penalty amount from Schedule M15 (see instructions). Also su	· · · · · · · · · · · · · · · · · · ·	26 ■	
_ ′	this amount from line 24 or add it to line 26 (enclose Schedule		27 ■	
	OU PAY ESTIMATED TAX and want part of your refund credited			
28	Amount from line 24 you want sent to you		28 ■	
	Amount from line 24 you want applied to your 2023 estimate		29 ■	
ахр	ayer(s): I declare that this return is correct and complete to the	best of my knowledge and belief.		
our/	Signature	Spouse's Signature (If Filing Jointly)	Da	te (MM/DD/YYYY)
	56337938 ime Phone	MUBASHIR224@GMAIL.COM Email Address		
	AM PRIYA RAM SAGAR GUPTA TALLAM Preparer's Signature	03292023 Date (MM/DD/YYYY)		02082703 TN or VITA/TCE # (required)
67	89659522	syam@gtaxfile.com		,
rep	arer's Daytime Phone	Preparer's Email Address		
	I do not want my paid preparer to file my return electronically.	I authorize the Minnesota Department of Revenue with the preparer or the third-party designee indicates and the preparer of the state o		
	Include a conviof your 2022 federal return and schedules	with the preparer of the third-party designee indica	ateu UII III	ıv icuciai icluiii.

Mail to: Minnesota Individual Income Tax, Mail Station 0010, 600 N. Robert St., St. Paul, MN 55145-0010 1031 REV 02/28/23 PRO





2022 Schedule M1W, Minnesota Income Tax Withheld

Complete this schedule to report Minnesota income tax withheld. Include this schedule when you file your return.

MUBASHIR T Your First Name and Initia	1	MOHAMMED Last Name	855865832 Your Social Security Number				
FATIMAH			MAHMOOD ALI				
If a Joint Return, Spouse's F	irst Name and Initial	Spouse's Last Name		987916645 Spouse's Social Security Number			
complete this schedul amounts to the neare W-2G; keep them with	e to determine line st whole dollar. You n your tax records. nd Minnesota tax w	y, W-2G, 1042-S, or Minnesota Scl e 20 of Form M1. List only the for u must include this schedule whe All instructions are included on the ithheld on Forms W-2, other than f	ms that report Minnesota incom n you file your return. DO NOT s his schedule.	ne tax withheld. Round dollar send in your Forms W-2, 1099, or			
Α	B—Box 13	C—Box 15	D—Box 16	E—Box 17			
If the Form W-2 is for:you, enter 1spouse, enter 2	If Retirement Plan box is checked, m X below.	Employer's seven-digit Minnesota Tax ID Number	State wages, tips, etc. (round to nearest whole dollar)	Minnesota tax withheld (round to nearest whole dollar)			
a1 <u>1</u>	b1	c1 MN3390237	d177500	e13986			
a2	b2	c2 MN	d2	e2			
a3	b3	c3 MN	d3	e3			
a4	b4	c4 MN	d4	e4			
a5	b5	c5 MN	d5	e5			
	-	n line 5 on page 2) rms W-2 (add amounts in line 1, co		2006			
2 Minnesota tax with	held on Forms 1099	, W-2G, and 1042-S. If you have mo	ore than four forms, complete line	6 on the back.			
Α		В	C	D			
If the Form 1099, W-2Gyou, enter 1spouse,	, or 1042-S is for:	Payer's seven-digit Minnesota Tax ID Numb (if unknown, contact the pa		Minnesota tax withheld (round to nearest whole dollar			
a1		b1 MN	c1	d1			
a2		b2 MN	c2	d2			
a3		p3 MN	c3	d3			
a4		b4 MN	c4	d4			
Subtotal for addition	nal 1099, W-2G, and	d 1042-S (from line 6 on page 2)					
Total Minnesota ta	x withheld on all 10	99, W-2G, and 1042-S (add amoun	ts in line 2, column D)	2 🔳			
		erships, S corporations, and fiduci					
4 Total. Add the Minr	nesota tax withheld	on lines 1, 2, an					

Include this schedule with your Form M1. If required, include Schedules KPI, KS, and KF.