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

	1.0101.000 051.100				
Submi	ission Identification Number (SID)				
Taxpaye	er's name	Social sec	urity numb	per	
FAR	OOQ ALI SHAIK	196-9	4-588	5	
	s's name			urity numbe	er
Doub	Tay Datum Information Tay Year Ending December 24	/F		م دادات ما	\
Part	<u> </u>	(Enter year you	are au	tnorizing	.)
	whole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1 1	1 68	3,188.
2	Total tax				7,767.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		.,588.
4	Amount you want refunded to you		4		8,821.
5	Amount you owe		5		
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get	and keep a co	opy of y	our retu	ırn)
return (to send for any Agent t paymer authori paymer busines taxes t person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part (original or amended) I am now authorizing. I consent to allow my intermediate service provider, d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason or delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial is ization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to teat, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellations days prior to the payment (settlement) date. I also authorize the financial institutions involved to receive confidential information necessary to answer inquiries and resolve issues related to an incomplete the financial consent.	transmitter, or electron for rejection of the end of th	etronic reference transmiser and its of and its of a tax preprint entry frization. The entry for the electric of the electric receivers and the electric rec	turn origina ssion, (b) to designated paration so to this acco To revoke ved no late ectronic posts	ator (ERO) he reason I Financial iftware for ount. This (cancel) a er than 2 ayment of e that the
	ayer's PIN: check one box only	Г			
X		erate my DIN	4 5 8	8 5	as my
	ERO firm name	•		digits, but	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) if you are entering your own PIN and your return is filed using the Practitioner PIN below.				
Your s	signature ▶ Dat	re ▶			
Snous	se's PIN: check one box only				
Spous	I authorize to enter or ger	erate my DIN			as my
_	ERO firm name		Enter five	digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.		don't ente	r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.				
Spous	se's signature ▶ Dat	re ►			
	Practitioner PIN Method Returns Only—continue	oelow			
Part	Certification and Authentication — Practitioner PIN Method Only				
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2 4 9	6 6		3 9
		201111	20		
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual incized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I an ements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Provide	n submitting this r	eturn in a	accordance	
ERO's	s signature ► Dat	:e ▶			
	ERO Must Retain This Form — See Instruction				
	Don't Submit This Form to the IRS Unless Requested				

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.

Filing Status	s 🔀 S	Single Married filing jointly	Marrie	ed filing separatel	y (MFS)	☐ Head of	household (HOH)			ring surviv	ving	
Check only one box.	•	u checked the MFS box, enter the r on is a child but not your dependen	,	our spouse. If yo	u check	ed the HOH or	QSS box, enter			e (QSS) ame if the	qualifying	
Your first name	me and middle initial Last name You						Yours	ocia	l security	number		
FAROOO 2	ALI		SHAI	K				196-94-5885				
If joint return, s	pouse's	first name and middle initial	Last nar	me				Spous	e's s	ocial secu	ırity number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	Presid	Presidential Election Campaign			
8625 HI	CKORY	7 ST					1239			e if you, o	•	
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete sp	paces below.	Sta	ite	ZIP code				ly, want \$3 Checking a	
FRISCO					TΣ	ζ	75034	box b	elow	will not c	0	
Foreign countr	y name		F	oreign province/sta	ate/coun	ty	Foreign postal cod	e your ta	ax or	r refund.	Spouse	
Digital		ny time during 2022, did you: (a) rec	•				, , ,	` '	. –	<u></u>		
Assets		ange, gift, or otherwise dispose of		<u>-</u> _			asset)? (See inst	ructions.) L	_ Yes	⊠ No	
Standard Deduction		eone can claim:	•	•		a dependent						
Age/Blindnes	s You:	Were born before January 2, 1	1958	Are blind	Spouse	: Was bor	n before January	/ 2, 1958	[Is blin	ıd	
Dependent	s (see	instructions):		(2) Social secu	urity	(3) Relationsh	nip (4) Check the	box if qua	alifies	for (see in	nstructions):	
If more	(1) Fi	rst name Last name		number		to you	Child tax	credit	Cre	edit for othe	er dependents	
than four]	
dependents, see instruction	s ——]	
and check]	
here L]								1]	
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .				. 1	а	8.	1,285.	
	b	Household employee wages not r	•	. ,				. 1	b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)										
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							e If			
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29										
If you did not	g	Wages from Form 8919, line 6.							g			
get a Form W-2, see	h	Other earned income (see instruction	,					. 1	h		0.	
instructions.	i	Nontaxable combat pay election (see instr	uctions)		<u>1</u> i				0.	1 005	
	<u>z</u>	Add lines 1a through 1h							Z	8_	1,285.	
Attach Sch. B if required.	2a	Tax-exempt interest	2a			axable interes			b			
ii required.	3a	Qualified dividends	3a			ordinary divide			b			
	4a	IRA distributions	4a			axable amoun			b			
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun			b			
Single or	6a	Social security benefits If you elect to use the lump-sum e	6a			axable amoun	t		b			
Married filing separately,	C	,		,	`	,		H F.	,		2 000	
\$12,950	7	Capital gain or (loss). Attach Sche Other income from Schedule 1, lir							7		3,000.	
 Married filing jointly or 	8	•							B		0,097.	
Qualifying surviving spouse,	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7 Adjustments to income from Sche		-		e 			9 0	0	8,188.	
\$25,900		•	•								0 100	
 Head of household, 	11 12	Subtract line 10 from line 9. This i Standard deduction or itemized	-						2		8,188.	
\$19,400 If you checked	13	Qualified business income deduction		`	,	 15-Δ			3		2 , 950.	
any box under	14								4	1 /	2 , 950.	
Standard Deduction,	15							_	5		2,930. 5,238.	
see instructions.		Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income							<u> </u>		J, ZJO.	

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 4972	3 🗍		16	7,767.
Credits	17	Amount from Schedule 2, lin	-					17	·
Orouno	18	Add lines 16 and 17					🗔	18	7,767.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812		🗔	19	·
	20	Amount from Schedule 3, lin	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				22	7,767.
	23	Other taxes, including self-e	employment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	7,767.
Payments	25	Federal income tax withheld							·
,	а	Form(s) W-2				25a 11,	,588.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c					2	5d	11,588.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20)21 return			26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit fro	m Schedule 8812	2		28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	indable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments			;	33	11,588.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amoun	nt you overpaid		34	3,821.
riciana	35a	Amount of line 34 you want			is attached, chec	ck here	. 🗆 🖪	5a	3,821.
Direct deposit?	b	Routing number 0 7 2			c Type:	Checking S	Savings		
See instructions.	d	Account number 5 9 1	8 5 7 1	7 9					
-	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g					;	37	
	38	Estimated tax penalty (see i	nstructions) .			38			
Third Party Designee		you want to allow another	•		rn with the IRS?		mplete bel	ow.	X No
•		signee's		Phone			nal identifica	tion _F	
		ne		no.			er (PIN)		
Sign Here		der penalties of perjury, I declare ief, they are true, correct, and con							
11010	Yo	ur signature		Date	Your occupation				you an Identity
Joint return?					 SOFTWARE I	EVELOPER	(see inst		I, enter it here
See instructions.	Spouse's signature. If a joint return, both must sign.			Date	Spouse's occupati		If the IR	S sent	your spouse an
Keep a copy for your records.	·			- Special Consumption			,	Identity Protection PIN, enter it h	
	Ph	one no. (214) 229-092	3	Email address	FAROOQALISHAI	K1997@GMAIL.CO	М		
Paid	Pre	eparer's name	Preparer's signat	ture		Date	PTIN		Check if:
	SYAN	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/17/2023	P020827	03	Self-employed
Preparer Use Only	Fin	m's name GLOBAL TA	XES LLC				Phone r	o. (6	78)965-9522
————	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's E	IN	84-3171965
Go to www.irs.go	ov/Form	n1040 for instructions and the late	est information.		BAA	REV 03/09/23 PRO			Form 1040 (2022)

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

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

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

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

	Sequence No. U I
Your soc	ial security number
196-94	-5885

FARC	OQ ALI SHAIK		196-94-5	5885
Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received			1
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C			
4	Other gains or (losses). Attach Form 4797			
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att			-10,097.
6	Farm income or (loss). Attach Schedule F			
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		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	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		
0	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	0- /		
	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			
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SE	or 1040-NR	line 8 10	- 10.097

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-ba	asis government		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903 .		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	a		
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit	łb		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m		-	
d	Reforestation amortization and expenses	ła	-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	le		
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24	łq		
_	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	h		
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	1j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	łk		
Z	Other adjustments. List type and amount:			
	24			
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			
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

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**

	(s) shown on return ROOQ ALI SHAIK				social se 6-94-	curity number
	you dispose of any investment(s) in a qualified opportunity	fund during the ta	x year?		0-94-	3003
•	es," attach Form 8949 and see its instructions for additiona	•	•			
Pa	Short-Term Capital Gains and Losses—Gei	nerally Assets I	Held One Year	or Less (see ins	tructions)
lines This	nstructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustn to gain or le Form(s) 894	nents oss from 19, Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
wnoi	e dollars.			line 2, col	umn (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	54,142.	65,719.	3	,800.	-7 , 777.
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 (lo	•			4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1			rusts fron	າ 5	
6		,	our Capital Loss	-	r 6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise					-7,777.
Par	t II Long-Term Capital Gains and Losses—Ger	nerally Assets H	leld More Than	One Yea	ır (see i	nstructions)
See lines	instructions for how to figure the amounts to enter on the below.	(d)	(e)	(g) Adjustn	nents	(h) Gain or (loss) Subtract column (e)
This whol	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or le Form(s) 894 line 2, col	9, Part II,	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	
	Net long-term gain or (loss) from partnerships, S corporati	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
	Capital gain distributions. See the instructions				13	
	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	through 14 in co	lumn (h). Then, go	o to Part I	П	

BAA

15

Schedule D (Form 1040) 2022 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 -7,777. • 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.

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.

OMB No. 1545-0074

2022

Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

196-94-5885

FAROOQ ALI SHAIK

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 wasn't reported to the IRS (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B 										
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, i 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.)	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).			
APEX CLEARING	01/01/22	12/31/22	1,612.	2,590.			-978.			
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	52,530.	63,129.	W	3,800.	-6,799.			
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b, if Box A above the place is checked, by line 2 (if Box A).	al here and ince is checked), lir	lude on your ne 2 (if Box B	54 142	65 719		3 800	_7 777			

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.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

Your social security number

OMB No. 1545-0074

FARC	DOQ ALI SHAIK						196-94	4-5885	;	
Par	Income or Loss From Rental Real Estate a Note: If you are in the business of renting personal prop rental income or loss from Form 4835 on page 2, line 40	erty, use		e C. See	instru	ctions. If you	are an indiv	idual, rep	oort farm	
	Did you make any payments in 2022 that would require yo If "Yes." did you or will you file required Form(s) 1099?									
	Physical address of each property (street, city, state, Z	. , , , , , , , , , , , , , , , , , , ,								
	3-102/1 PEDAVADLAPUDI MANGALAGIRI, GUN		<u> </u>	וח זי חח	ECII	TNI EOOEO	2			
A B	3-102/1 PEDAVADLAPODI MANGALAGIRI, GUI	NIUR A	ANDHKA	PRADI	ЕЭП_	IN 32230	3			
1b	(from list below) above, report the number of fai	For each rental real estate property list above, report the number of fair rental				Fair Rental Days			QJV	
Α	g personal use days. Check the 0			Α		365		0		
В		if you meet the requirements to file as qualified joint venture. See instructions								
С	quained joint venture. See inst	i uctions).	С						
1	of Property: Single Family Residence 3 Vacation/Short-Term Re Multi-Family Residence 4 Commercial	ental	5 Land 6 Roya			Self-Rental Other (desc				
_						Propert	ies:			
Incon				Α	1.0	В			С	
3	Rents received			6	13.					
4	Royalties received	. 4								
Expe										
5	Advertising									
6	Auto and travel (see instructions)			1 0	0.7					
7	Cleaning and maintenance			1,9	8/.					
8	Commissions									
9	Insurance									
10	Legal and other professional fees			1 0	E C					
11 12	Management fees			1,8	56.					
13	Mortgage interest paid to banks, etc. (see instructions)									
14	Other interest			2 7	4.0					
	Repairs			1,6	40.					
15	Supplies			1,0	34.					
16 17		. 17		2,4	0.5					
17	Utilities			2,4	95.					
19	Depreciation expense or depletion	19								
20	Other (list) Total expenses. Add lines 5 through 19			10,7	1 0					
	Subtract line 20 from line 3 (rents) and/or 4 (royalties). I			10,7	10.					
21	result is a (loss), see instructions to find out if you mus file Form 6198	st		-10,0	97.					
22	Deductible rental real estate loss after limitation, if any on Form 8582 (see instructions)	/,	(10,09		()	(,	
23a	Total of all amounts reported on line 3 for all rental prop				23a		613.			
b	Total of all amounts reported on line 4 for all royalty pro				23b					
С	Total of all amounts reported on line 12 for all propertie				23c					
d	Total of all amounts reported on line 18 for all propertie				23d					
е	Total of all amounts reported on line 20 for all propertie				23e	10	710.			
24	Income. Add positive amounts shown on line 21. Do n		de any lo	osses			. 24			
25	Losses. Add royalty losses from line 21 and rental real est		•		nter to	otal losses he	ere 25	(10,097.	
26	Total rental real estate and royalty income or (loss) here. If Parts II, III, IV, and line 40 on page 2 do no	t apply	to you,	also er	nter th	nis amount	on			
	Schedule 1 (Form 1040), line 5. Otherwise, include this	amount	in the to	tal on li	ne 41	on page 2	. 26		-10.097	