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 s	security num	ber
MOSIN K MOHAMMED 477	-53-615	58
Spouse's name Spouse	's social sec	curity number
ATHIYA BEGUM 477	-85-327	70
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Enter year y	ou are at	uthorizing.)
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	162,739.
2 Total tax		17,336.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	. 3	15,293.
4 Amount you want refunded to you	. 4	
5 Amount you owe		2,056.
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a	copy of	your return)
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or eto send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treas Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debauthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the aut payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests mubusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the process taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now a Electronic Funds Withdrawal Consent.	the transm sury and its the tax pre- bit the entry chorization. ust be receing of the e I further a	ission, (b) the reason designated Financia paration software for to this account. This To revoke (cancel) as ived no later than 2 electronic payment of cknowledge that the
Taxpayer's PIN: check one box only	2 6	1 5 0
▼ I authorize GLOBAL TAXES LLC to enter or generate my PIN		1 5 8 as my
ERO firm name		e digits, but er all zeros
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 auth if you are entering your own PIN and your return is filed using the Practitioner PIN method. The below. Your signature ► Mosin Khan Mohammo Date ► 03/26/	ERO mus	
Spouse's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate my PIN 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 if you are entering your own PIN and your return is filed using the Practitioner PIN method. The below.	Enter five don't ent norizing. C	
Spouse's signature ► Athiya Begum Date ► 03/26	/2023	
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 by your five-digit self-selected PIN. 2 2 2 4 Dor	9 6 6 n't enter all z	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting thi requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Individual	s return in	accordance with the

Date ▶

REV 03/18/23 PRO

ERO's signature ▶

ERO Must Retain This Form — See Instructions

Form 1040-V (2022) 2022 Page 2

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V** 2022

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service

Form 1040-V Payment Voucher

▶ Use this voucher when making a payment with Form 1040.

► Do not staple this voucher or your payment to Form 1040.

► Make your check or money order payable to the 'United States Treasury.'

► Write your social security number (SSN) on your check or money order.

Enter the amount of your payment . .

2,056.

REV 03/18/23 PRO

1555

MOZIN K MOHAMMED ATHIYA BEGUM 5401 INDEPENDENCE PKWY 1601 PLANO TX 75023

INTERNAL REVENUE SERVICE P.O. BOX 1214 CHARLOTTE, NC 28201-1214

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 Check only		Single 🔀 Ma	arried filing jointly	Marrie	ed filing separate	ly (MFS)	Head of	hous	ehold (HOH	l)		lifying surv use (QSS)	iving
one box.			MFS box, enter the		our spouse. If yo	u check	red the HOH or	r QS	S box, ente	r the o	child's	name if th	e qualifying
Your first name			ut not your depende		mo						O11K 00	cial security	, number
	anu mi	udie iriitiai		Last na									
MOSIN K If joint return, sp	20100'0	first name and	middle initial	Last na	MMED					_		53-6158	urity number
, , ,	ouse s	iirst riame and	middle imilai										
ATHIYA	numbo	r and atract) If y	you have a P.O. box, s	BEGU					Apt. no.			35-3270	
			•	see mstructio	JIIS.				•	- 1		ntial Election nere if you,	n Campaign
		NDENCE PK	<u>. ω </u>	complete s	naces holow	Sta	210	7ID	1601 code				ly, want \$3
	JSt Offic	e. II you have a	i loreigii address, aiso	complete s	paces below.	T			023		0	this fund. (0
PLANO Foreign country	namo				Foreign province/st			+	eign postal co			ow will not a cor refund.	change
r oreign country	Hairie				oreign province/st	ate/Couri	ıy	1 016	agii postai co	ue y	our tux	You	Spouse
Digital	At an	y time during	2022, did you: (a) r	eceive (as	a reward, award	, or payı	ment for prope	erty o	r services);	or (b)) sell,		
Assets	exch	ange, gift, or o	otherwise dispose o	of a digital	asset (or a financ	cial inter	est in a digital	asse	et)? (See ins	structi	ions.)	Yes	⊠ No
Standard	Som	eone can cla	im: 🗌 You as a	dependent	t 🗌 Your sp	ouse as	a dependent						
Deduction		Spouse itemize	es on a separate re	turn or you	were a dual-sta	tus alier	1						
Age/Blindness	You:	☐ Were bo	rn before January 2	, 1958	Are blind	Spouse	: Was bo	rn be	fore Janua	ry 2, 1	1958	☐ Is bli	nd
Dependents	(see	instructions):			(2) Social sec	urity	(3) Relationsh	nip	(4) Check th	e box	if qualit	ies for (see	nstructions):
If more	(1) Fi	rst name	Last name		number		to you		Child ta	x cred	it	Credit for oth	er dependents
than four	MUJT	ABA ARHAM K	MOHAMMED		895-69-5	395	Son		>	<			
dependents, see instructions	KHA	DIJAH K	MARIAM		010-93-1	222	Daughter	-	>	<			
and check													
here												. [
Income	1a	Total amoun	t from Form(s) W-2	, box 1 (se	e instructions)						1a	16	5,690.
	b	Household e	mployee wages no	t reported	on Form(s) W-2						1b		
Attach Form(s) W-2 here. Also	С	Tip income r	not reported on line	1a (see ins	structions) .						1c		
attach Forms	d	Medicaid wa	iver payments not i	ayments not reported on Form(s) W-2 (see instructions)						1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							1e				
was withheld.	f		ovided adoption be								1f		
If you did not	g	_	Form 8919, line 6								1g		
get a Form W-2, see	h		d income (see instru	,			1	i			1h		0.
instructions.	i		combat pay election	n (see instr	ructions)		<u>1</u> i						
	Z	Add lines 1a	· ·	 I . I							1z		5,690.
Attach Sch. B	2a		interest	2a	4.5		axable interes				2b		
if required.	3a		idends	3a	45.		Ordinary divide				3b		49.
	4a -		ions	4a		1	axable amoun				4b		
Standard Deduction for—	5a		d annuities	5a			axable amoun				5b		
Single or	6a		ity benefits	6a			axable amoun	it.			6b		
Married filing separately,	c	•	o use the lump-sum		•	•	,				-		2 000
\$12,950	7	. 0	or (loss). Attach Sc		•			•		ш	7		3,000.
 Married filing jointly or 	8		e from Schedule 1,								8	1.0	0 720
Qualifying surviving spouse,	9		, 2b, 3b, 4b, 5b, 6b		-						9		2,739.
\$25,900	10	•	to income from Sc	•						•	10	_	0 720
 Head of household, 	11		10 from line 9. This	-	-						11		2,739.
\$19,400	12		eduction or itemize				 NE A				12		5,900.
If you checked any box under	13		siness income dedu								13		E 000
Standard Deduction,	14 15		and 13 14 from line 11. If :							•	14		<u>5,900.</u>
see instructions.	13	Jubliact III16	. 14 II OHI III IE 11. II A	LGIO OI IUS	ه, حسور -u ۱۱۱۱۵	is your	taxable illcoll	16		•	15	1 13	6,839.

Form 1040 (202	(2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌		16	21,336.
Credits	17	Amount from Schedule 2, lin	ie 3					17	
	18	Add lines 16 and 17						18	21,336.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	4,000.
	20	Amount from Schedule 3, lin	ie 8					20	
	21	Add lines 19 and 20						21	4,000.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	17,336.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	17,336.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25 a 15	5,293.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	15,293.
If you have a	26	2022 estimated tax payment	s 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 from	n 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	ie 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	15,293.
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amou	ınt you overpaid		34	
neruna	35a	Amount of line 34 you want	refunded to you	u. If Form 8888	is attached, che	ck here	🗆	35a	
Direct deposit?	b	Routing number X X X	XXXXX	XX	c Type:	Checking	Savings		
See instructions	. d	Account number X X X X X X X X X							
	36	Amount of line 34 you want a	applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, go						07	2 056
Tou Owe	38	, ,, ,	•	•		38	13.	37	2,056.
This Dest		Estimated tax penalty (see in					13.		
Third Party Designee		you want to allow another					omplete h	elow	× No
Designee		signee's		Phone			omplete t		
	nai			no.			ber (PIN)	ioation	
Sign		der penalties of perjury, I declare t			, , ,		,		, ,
Here		ur signature	protor Doorar attorn					IRS se	nt you an Identity
Joint return?	М	osin Khan Moha	Gamme	03/26/2023	SOFTWARE	ENGINEER	Prote (see		IN, enter it here
See instructions.		ouse's signature. If a joint return, t		Date	Spouse's occupa		If the	IRS ser	nt your spouse an
Keep a copy for your records.			_				I	,	ection PIN, enter it here
your records.	Athu	Athiya Begum			SOFTWARE	ENGINEER	(see	inst.)	
		one no. (512)422-422		Email address	MOSINSAN@		1		
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer	VENK	ATA SAI PAVAN KUMAR DUDIPALLI		PAVAN KUM	AR DUDIPALLI	03/26/2023	P02470		Self-employed
Use Only	Fire	m's name GLOBAL TAX					Phor	ie no. (678)965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm	s EIN	88-2145487
Go to www.irs.g	gov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/18/23 PRO			Form 1040 (2022)

SCHEDULE D (Form 1040)

Department of the Treasury

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**

Internal Revenue Service Name(s) shown on return Your social security number 477-53-6158 MOSIN K MOHAMMED & ATHIYA BEGUM Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 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 24,260. 27,799. 245. -3,294. 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 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -3,294.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 (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 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 5,076. 2,002. -3,074.9 Totals for all transactions reported on Form(s) 8949 with

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

11

12

13

14

15

-3,074.

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -6,368. • 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 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. 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 qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X 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

(Example: 100 sh. XYZ Co.) (Mo., day, yr.) (see instructions) in the separate instructions. Code(s) from instructions APEX CLEARING 01/01/22 12/31/22 22,894. 26,271. W 245. -3,132 ROBINHOOD SECURITIES LLC 01/01/22 12/31/22 1,366. 1,528. -162	MOSIN K MOHAMMED & ATH	IYA BEGUM	I		477-53	-6158		
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	statement will have the same informa	tion as Form						
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. Xi (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)	instructions). For lo Note: You may agg reported to the IRS	ng-term tra regate all s and for whi	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or cod	oorted on Form les are required	(s) 1099-E d. Enter th	showing basi e totals directly	s was y on
(B) Short-term transactions reported to you on Form (9) 1099-B showing basis wasn't reported to the IRS (c) Short-term transactions not reported to you on Form 1099-B 1	You must check Box A, B, or C I complete a separate Form 8949, p	pelow. Chec page 1, for ea	k only one k ach applicabl	oox. If more than le box. If you ha	one box applies	s for your s	hort-term transa	ctions,
1 (e) Description of property (Example: 100 eh. XYZ Co.) Date soul or (Mo., day, yr.) (e) Date sol or (Mo., day, yr.) (e) Example: 100 eh. XYZ Co.) (e) Date sol or (Mo., day, yr.) (e) Example: 100 eh. XYZ Co.) (e) Date sol or (Mo., day, yr.) (e) Example: 100 eh. XYZ Co.) (e) Date sol or (Mo., day, yr.) (e) Example: 100 eh. XYZ Co.) (e) Date sol or (Mo., day, yr.) (e) Example: 100 eh. XYZ Co.) (e) Date sol or (Mo., day, yr.) (e) Example: 100 eh. XYZ Co.) (e) Cost or other basis See the Note below of the Section	☐ (B) Short-term transactions	reported on	Form(s) 1099	9-B showing bas				e)
(Example: 100 sh. XÝZ Ćo.) (Mo., day, yr.) (Mo., day, yr.) (see instructions) (see instructions) (see instructions) (and see ordinary of instruct	(a)			Proceeds S (sales price) a	Cost or other basis	If you enter an enter a c	amount in column (g), ode in column (f).	Gain or (loss)
ROBINHOOD SECURITIES LLC 01/01/22 12/31/22 1,366. 1,528162					in the separate	Code(s) from	Amount of	from column (d) and combine the result with column (g).
	APEX CLEARING	01/01/22	12/31/22	22,894.	26,271.	M	245.	-3,132.
	ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	1,366.	1,528.			-162.
2 Totals Add the amounts in columns (d) (e) (a) and (h) (subtract	2 Totals Add the amounts in columns	(d) (a) (a) cas	1 (h) (eubtroot					

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.

24,260.

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) .

27,799.

Attachment Sequence No. 12A Form 8949 (2022)

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side MOSIN K MOHAMMED & ATHIYA BEGUM

Social security number or taxpayer identification number

477-53-6158

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

Part II

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

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

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

✗ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on	Form(s) 1099	-B showing bas				e)
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below			(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	01/01/21	12/31/22	145.	1,025.			-880.
ROBINHOOD SECURITIES LLC	01/01/21	12/31/22	1,857.	4,051.			-2,194.
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 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked).			2,002.	5,076.			-3,074.

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

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

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

OMB No. 1545-0074

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

Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Attachment Sequence No. **47**

Your social security number

MOSI	N K MOHAMMED & ATHIYA BEGUM	477-53-	-6158
Par	t I Child Tax Credit and Credit for Other Dependents		
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	. 1	162,739.
2a	Enter income from Puerto Rico that you excluded		
b	Enter the amounts from lines 45 and 50 of your Form 2555	0.	
c	Enter the amount from line 15 of your Form 4563		
d	Add lines 2a through 2c	. 2d	0.
3	Add lines 1 and 2d	. 3	162,739.
4	Number of qualifying children under age 17 with the required social security number 4	2	
5	Multiply line 4 by \$2,000	. 5	4,000.
6	Number of other dependents, including any qualifying children who are not under age		
	17 or who do not have the required social security number	0	
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resid	ent	
	alien. Also, do not include anyone you included on line 4.		
7	Multiply line 6 by \$500	. 7	
8	Add lines 5 and 7	. 8	4,000.
9	Enter the amount shown below for your filing status.		
	• Married filing jointly—\$400,000		
	• All other filing statuses—\$200,000 \(\)	. 9	400,000.
10	Subtract line 9 from line 3.		
	• If zero or less, enter -0		
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For		
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.	. 10	0.
11	Multiply line 10 by 5% (0.05)	. 11	0.
12	Is the amount on line 8 more than the amount on line 11?	. 12	4,000.
	No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit	edit.	
	Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.		
	Yes. Subtract line 11 from line 8. Enter the result.		
13	Enter the amount from the Credit Limit Worksheet A	. 13	21,336.
14	Enter the smaller of line 12 or 13. This is your child tax credit and credit for other dependents	. 14	4,000.
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.		
	If the amount on line 12 is more than the amount on line 14, you may be able to take the addition	nal child t	ax credit
	on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-N	R through	line 27
	(also complete Schedule 3, line 11) before completing Part II-A.		
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 03/18/23 PRO	Schedule	8812 (Form 1040) 2022
u		301104410	(1 10 10) 2022

Schedule 8812 (Form 1040) 2022

Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line	27 .	
16a	Subtract line 14 from line 12. If zero, stop here; you cannot take the additional child tax credit. Skip Parts II-A		
	and II-B. Enter -0- on line 27	16a	0.
b	Number of qualifying children under 17 with the required social security number: x \$1,500.		
	Enter the result. If zero, stop here; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	
	TIP: The number of children you use for this line is the same as the number of children you used for line 4.		
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\dots \dots \dots \dots \dots \dots \dots \dots \dots$	20	
	Next. On line 16b, is the amount \$4,500 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
	Otherwise, go to line 21.		
Part	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	s of F	uerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see		
	instructions	-	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form		
22	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22	-	
23	Add lines 21 and 22	-	
24	1040 and		
	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27, and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	
26	Enter the larger of line 20 or line 25	25	
20	Next, enter the smaller of line 27 or line 26 on line 27.	20	
Part	II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	

(Rev. November 2022)

Department of the Treasury Internal Revenue Service

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and
Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074 For tax year 20 Attachment Sequence No. 70

Taxpayer name(s) shown on return Taxpayer identification					
MOS	8				
Prepare	r's name	Preparer tax identifica	ation numb	er	
VENI	KATA SAI PAVAN KUMAR DUDIPALLI	P02470833			
Part	·				
	e check the appropriate box for the credit(s) and/or HOH filing status claimed on the ret				
for the	benefit(s) claimed (check all that apply).		AOTC		HOH
1	Did you complete the return based on information for the applicable tax year provided or reasonably obtained by you? (See instructions if relying on prior year earned income.)		Yes	No	N/A
2	If credits are claimed on the return, did you complete the applicable EIC and/or (worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Scheol 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instruction worksheet(s) that provides the same information, and all related forms and schedules claimed?	dule 8812 (Form s, or your own	X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you the following. • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status. • Review information to determine that the taxpayer is eligible to claim the credit(s) are	r's responses to			
4	status and to figure the amount(s) of any credit(s)	g the return, or stent? (If " Yes ,"	X	×	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent in	formation? .			
b	Did you contemporaneously document your inquiries? (Documentation should includ you asked, whom you asked, when you asked, the information that was provided, and information had on your preparation of the return.)	e the questions I the impact the			
5	Did you satisfy the record retention requirement? To meet the record retention require keep a copy of your documentation referenced in question 4b, a copy of this Form 886 applicable worksheet(s), a record of how, when, and from whom the information used to 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filling states a required of the available.	7, a copy of any to prepare Form provided by the	×		
	the amount(s) of the credit(s)		~		
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return is selected for audit?	return if his/her	×		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous		×		
	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)				
а	Did you complete the required recertification Form 8862?				
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare correct Schedule C (Form 1040)?				
			- 00/	_	

Form 88	867 (Rev. 11-2022)			Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a		Yes	No	N/A
	claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC			
	and does not have a qualifying child, go to question 10.)			
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of			
Ū	more than one person (tiebreaker rules)?			
Part		claim C	CTC, A	CTC,
	or ODC, go to Part IV.)			
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is	Yes	No	N/A
	a citizen, national, or resident of the United States?	X		
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with			
	the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	×		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or			
	separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar			
	statement to the return?	×		
Part	The state of the s		Part \	
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qu	alified	Yes	No
Dout	tuition and related expenses for the claimed AOTC?		Dort.	\//\
Part 14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax		Yes	No
14	and provided more than half of the cost of keeping up a home for the year for a qualifying person?	. year		
Part				
	You will have complied with all due diligence requirements for claiming the applicable credit(s) and on the return of the taxpayer identified above if you:	or HO	H filing	status
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's respo in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(status and to figure the amount(s) of the credit(s);	nses on s) and/c	the ref or HOH	turn or filing
	 B. Complete this Form 8867 truthfully and accurately and complete the actions described in this check credit(s) claimed and HOH filing status, if claimed; 	list for a	ıny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 Document Retention.	67 instr	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).	's eligib	ility for	the
	A record of how, when, and from whom the information used to prepare this form and the applica obtained.	ble wor	ksheet((s) was
	A record of any additional information you relied upon, including questions you asked and the tax determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount	payer's ınt(s) of	respon the cre	ises, to edit(s).
	If you have not complied with all due diligence requirements, you may have to pay a penalty for each related to a claim of an applicable credit or HOH filing status (see instructions for more information	h failur).	e to co	omply
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct	t. and	Yes	No
	complete?		X	