## 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 securi	ty number	
SARANYA NANTHAN	280-33	-9458	
Spouse's name	Spouse's soc	ial securit	y number
THURABUDEEN MOHAMED SAHUL HAMEED	892-81	-3964	
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Enter	er year you a	re autho	orizing.)
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	211,600
2 Total tax		2	32,272
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	36,060
4 Amount you want refunded to you		4	3,788
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of you	ur return)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboreturn (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmost of 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 Leading to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account incompayment 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 terminar payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recompayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recompayment, I must contact 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 at Electronic Funds Withdrawal Consent.  Taxpayer's PIN: check one box only  I authorize GLOBAL TAXES LLC to enter or generate 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.	ove are the amonitter, or electron of the transport of trans	ounts from ounce return ransmission and its des ax preparate entry to ation. To expect received for the election and, and are are the received for a consisting and, and the received for the received for the received for the election and, and are received for the election and, and are received for the election and, and are received for the election are received for the election and are received for the election and are received for the election and are received for the election are received for the election and are received	m the income to noriginator (ER(on, (b) the reason signated Financiation software fithis account. The revoke (cancel) do no later than tronic payment towledge that the properties of the same tronic payment towledge that the properties of the same tronic payment towledge that the properties of the same tronic payment towledge that the properties of the same tronic payment towledge that the properties of the same tronic payment to the same tronic payment tronic paym
if you are entering your own PIN and your return is filed using the Practitioner PIN met below.		) must c	
Your signature ▶ Date ▶	04/09/202	.3	
Spouse's PIN: check one box only  I authorize GLOBAL TAXES LLC to enter or generate signature on the income tax return (original or amended) I am now authorizing.	En	3 9 ter five dig n't enter a	
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 ▶	04/09/20	) must c	
Practitioner PIN Method Returns Only—continue below	V		
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	Don't ent	6 6 1	s
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 subtractive ments of the Practitioner PIN method and PIN 1345. Headbook for Authorized IPS a file Providers of	mitting this retu	urn in acc	cordance with th

ERO's signature ▶

Date ▶

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

2022	
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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 separately	(MFS)	Head of	househ	old (HOF	H) [		fying survi	iving
Check only one box.	If vo	u checked the MFS box, enter the r	name of v	our shouse If you	check	ed the HOH or	r 088 I	nov ente	r the	•	se (QSS) name if the	e aualifyina
one box.		on is a child but not your dependen		our spouse. It you	CHOOK		QOO	oox, crite	1 1110	ornia 3 i	iamo ii iii	5 qualitying
Your first name			Last na	me					Y	our soc	ial security	number
SARANYA			NANT							280-33-9458		
	nouse's	first name and middle initial	Last na						_			urity number
THURABUI		, mot hame and middle initial	MOHA		17 MEE	מיז				-	1-3964	•
		r and street). If you have a P.O. box, see			174141E	طة	Δ	pt. no.				n Campaign
4311 138	•		o in loti dotiv	5110.			/ `	pt. 110.			ere if you, o	
		ce. If you have a foreign address, also co	omnlete s	naces helow	Sta	to.	ZIP co	nde.				ly, want \$3
LYNNWOOI		oc. If you have a foreign address, also of	ompiete s	paces below.	WA		980			_		Checking a
Foreign country			F	Foreign province/stat				n postal co			w will not on refund.	change
r oreign country	y Harric			oreign province/stat	c/ court	·y	loroigi	i postai oc	,ac ,	ou. tur	You	Spouse
Dimital	۸+ on	ny time during 2022, did you: (a) rec	noisto (no	a roward award	or nove	nont for propo	rtu or o	on dood	· or /b	) aall		
Digital Assets		ange, gift, or otherwise dispose of									Yes	⊠ No
Standard		eone can claim:					abbotij	(000 111	otraot	10110.)		
Deduction	_	Spouse itemizes on a separate retu		•								
		·		_	io allori							
Age/Blindness	You:	Were born before January 2, 1	1958	☐ Are blind S	pouse	: Was bor					Is blir	
Dependents				(2) Social secui	rity	(3) Relationsh	nip (4)	Check th	e box	if qualifie	es for (see i	nstructions):
If more	<b>(1)</b> Fi	rst name Last name		number		to you		Child ta	ax crec	dit C	Credit for oth	er dependents
than four									<u> </u>			
dependents, see instruction:	s								<u> </u>			
and check									<u></u>			
here								L			<u>L</u>	
Income	1a	Total amount from Form(s) W-2, b	,	•						1a	22	7,233.
A441- F(-)	b	Household employee wages not r	•	. ,						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1	•	,						1c		
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits		-						1e		
was withheld.	f	Employer-provided adoption bene		•						1f		
If you did not	g	Wages from Form 8919, line 6.								1g		
get a Form W-2, see	h	Other earned income (see instruct	,							1h		0.
instructions.	i	Nontaxable combat pay election (	(see instr	ructions)		<u>1i</u>					-	п 000
		Add lines 1a through 1h								1z	22	7,233.
Attach Sch. B	2a	Tax-exempt interest	2a	F10		axable interes				2b		1.
if required.	3a	Qualified dividends	3a	512.		rdinary divide				3b	+	516.
	4a -	IRA distributions	4a			axable amoun				4b	+	
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun				5b	+	
Single or	6a	Social security benefits	6a	and the selection of the selection of		axable amoun	τ			6b	_	
Married filing separately,	c	If you elect to use the lump-sum e		•	`	,			. 📙	-	4	2 000
\$12,950	7	Capital gain or (loss). Attach Sche		•	•				. ⊔	7		3,000.
Married filing jointly or	8	Other income from Schedule 1, lir								8		3,150.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								9	21	1,600.
\$25,900	10	Adjustments to income from Sche								10	+	1 600
Head of household,	11	Subtract line 10 from line 9. This i	-	-						11		1,600.
\$19,400	12	Standard deduction or itemized		`	,	 E A				12	$+\frac{2}{}$	5,900.
If you checked any box under	13	Qualified business income deduct								13	+	
Standard Deduction,	14	Add lines 12 and 13								14		<u>5,900.</u>
see instructions.	15	Subtract line 14 from line 11. If ze	or less	s, enter -U This is	your <b>t</b>	axable incom	ie .			15	Т 8	5,700.

Form 1040 (2022	2)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	32,193.
Credits	17	Amount from Schedule 2, lin	ne 3					17	
	18	Add lines 16 and 17						18	32,193.
	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	. If zero or less,	enter -0				22	32,193.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .			23	79.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	32,272.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				<b>25a</b> 3	6,060.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c	0.		
	d	Add lines 25a through 25c						25d	36,060.
If you have a	26	2022 estimated tax payment	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 from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, 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	syments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	36,060.
Refund	34	If line 33 is more than line 24						34	3,788.
neiuliu	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, che	eck here	🗆	35a	3,788.
Direct deposit?	b	Routing number 1 2 1	0 0 0 3	5 8	c Type:	Checking	Savings		
See instructions.	d	Account number 3 2 5	0 2 2 1	2 1 8 1	L   7				
	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, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party Designee		you want to allow another	person to disc	cuss this retur	n with the IRS		Complete	below.	⊠ No
		signee's		Phone			rsonal ident	ification	
	naı			no.			mber (PIN)		
Sign Here		der penalties of perjury, I declare t ief, they are true, correct, and com			1 , 0		,		, ,
TICIC	Yo	ur signature		Date	Your occupation		Pro	tection P	nt you an Identity IN, enter it here
Joint return?					ENGINEER			inst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.						nt your spouse an ection PIN, enter it here
your records.					ENGINEER			inst.)	ection File, enter it here
	———Ph	one no. (619)606-859	6	Email address		NDHU@GMAIL.C	TOM	•	
		eparer's name	Preparer's signat	l	PHALMINATION	Date	PTIN		Check if:
Paid		ATA SAI PAVAN KUMAR DUDIPALLI	'		AR DUDIPALLI			.U833	Self-employed
Preparer		n's name GLOBAL TA		TANAM IVON	WY DODIENTI	.   07/09/2023			(678)965-9522
Use Only			Y CT E BRU	MCWTCK M	J 08816			n's EIN	
0-1				TADMICK INC				ISLIIN	88-2145487
GO TO WWW.Irs.go	v/r-orn	n1040 for instructions and the late	st information.		BAA	REV 03/22/23 PRO	)		Form <b>1040</b> (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 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
S NANTHAN & T MOHAMED SAHUL HAMEED

Your social security number
280-33-9458

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ch Schedule E .	5	-13,150.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ( )		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
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			
	,	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	- /		
	1040, line 1a or 1d	8s ( )		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u		8u		
Z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	10 1=6
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR,	or 1040-NR, line 8	10	-13,150.

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

Educator expenses   11	Par	Adjustments to Income			
officials. Attach Form 2106  1 Health savings account deduction. Attach Form 8889  1 Health savings account deduction. Attach Form 8889  1 Deductible part of self-employment tax. Attach Schedule SE  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed health insurance deduction  1 The Penalty on early withdrawal of savings  1 Ba Alimony paid  1 Ba Pecipient's SSN  1 C Date of original divorce or separation agreement (see instructions):  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA desclustion  3 IFA desclustion  3 IFA desclustion  3 IFA desclustion  4 IFA descl	11			11	
officials. Attach Form 2106  1 Health savings account deduction. Attach Form 8889  1 Health savings account deduction. Attach Form 8889  1 Deductible part of self-employment tax. Attach Schedule SE  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed health insurance deduction  1 The Penalty on early withdrawal of savings  1 Ba Alimony paid  1 Ba Pecipient's SSN  1 C Date of original divorce or separation agreement (see instructions):  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA desclustion  3 IFA desclustion  3 IFA desclustion  3 IFA desclustion  4 IFA descl	12	Certain business expenses of reservists, performing artists, and fee-ba	asis government		
13 Health savings account deduction. Attach Form 8889		officials. Attach Form 2106		12	
15 Deductible part of self-employment tax. Attach Schedule SE 16 Self-employed SEP, SIMPLE, and qualified plans 17 Self-employed death insurance deduction 17 Penalty on early withdrawal of savings 18 Penalty on early withdrawal of savings 19a Alimony paid 19a Alimony paid 19a Recipient's SSN 19a Becipient's SSN 19a Becipient	13	Health savings account deduction. Attach Form 8889		13	
16 Self-employed SEP, SIMPLE, and qualified plans	14			14	
17 Self-employed health insurance deduction 18 Penalty on early withdrawal of savings 18 18 19 Alimony paid 19 Recipient's SSN 10 Date of original divorce or separation agreement (see instructions): 20 IRA deduction 21 Student loan interest deduction 22 Archer MSA deduction 23 Archer MSA deduction 24 Other adjustments: 25 Jury duty pay (see instructions) 26 Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit 24 Contributions of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m 24 Reforestation amortization and expenses 24 Repayment of supplemental unemployment benefits under the Trade Act of 1974 24 Contributions to section 501(c)(18)(D) pension plans 24 Contributions by certain chaplains to section 403(b) plans 24 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24 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 24 Jeli 25 Total other adjustments. Add lines 24a through 24z 26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	15			_	
18	16			-	
19a Alimony paid b Recipient's SSN c Date of original divorce or separation agreement (see instructions):  20 IRA deduction		Self-employed health insurance deduction		$\overline{}$	
b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 1RA deduction	18			-	
c Date of original divorce or separation agreement (see instructions):  IRA deduction	19a			19a	
20   Student loan interest deduction   21   22   23   24   22   24   24   24   24	b	Recipient's SSN			
Student loan interest deduction Reserved for future use Archer MSA deduction  Other adjustments:  Jury duty pay (see instructions)  Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit  Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m.  Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974.  Contributions to section 501(c)(18)(D) pension plans  Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions).  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  Housing deduction from Form 2555.  Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041).  Total other adjustments. List type and amount:  25  Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	С	Date of original divorce or separation agreement (see instructions):			
22 Archer MSA deduction				-	
Archer MSA deduction Other adjustments:  Jury duty pay (see instructions)  Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit  Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974 Contributions to section 501(c)(18)(D) pension plans Contributions by certain chaplains to section 403(b) plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 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 Jeuseph Housing deduction from Form 2555 Let Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Cother adjustments. List type and amount:  Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on				$\overline{}$	
24 Other adjustments: a Jury duty pay (see instructions) b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit				-	
a Jury duty pay (see instructions)  b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit  c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m				23	
b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24		_		
rental of personal property engaged in for profit		, , , , ,	la		
c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	b				
and USOC prize money reported on line 8m			łb	-	
d Reforestation amortization and expenses	С				
e Repayment of supplemental unemployment benefits under the Trade Act of 1974					
Act of 1974			ła		
f Contributions to section 501(c)(18)(D) pension plans	е		la la		
g Contributions by certain chaplains to section 403(b) plans					
h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)				-	
discrimination claims (see instructions)	_		rg		
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	"		lh		
from the IRS for information you provided that helped the IRS detect tax law violations	i	·	***		
tax law violations	٠				
j Housing deduction from Form 2555			4i		
k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	i				
1041)	k		.,		
z Other adjustments. List type and amount:	•••		lk		
Total other adjustments. Add lines 24a through 24z	z				
Total other adjustments. Add lines 24a through 24z	_		łz		
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	25			25	
	26	,			
				26	

# SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

### **Additional Taxes**

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

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

OMB No. 1545-0074

2022

Attachment
Sequence No. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR S NANTHAN & T MOHAMED SAHUL HAMEED

Your social security number 280-33-9458

Pai	tl Tax		
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17.	3	
Par	t II Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	
5	Social security and Medicare tax on unreported tip income.  Attach Form 4137		
6	Uncollected social security and Medicare tax on wages. Attach Form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.		
	If not required, check here	8	
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	79.
12	Net investment income tax. Attach Form 8960	12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	
	(cc	ontini	ied on page 2)

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

### Part II Other Taxes (continued)

17	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount:			
		17a		
b	Recapture of federal mortgage subsidy, if you sold your home			
	see instructions	17b	+	
	Additional tax on HSA distributions. Attach Form 8889	17c	-	
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
- 1	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
z	Any other taxes. List type and amount:			
		17z		
18	Total additional taxes. Add lines 17a through 17z		18	
19	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your <b>total other taxe</b> on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b	es. Enter here and	21	79.

#### **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.

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Internal Revenue Service Name(s) shown on return Your social security number 280-33-9458 S NANTHAN & T MOHAMED SAHUL HAMEED 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 141,383. 167,610. 14,488. -11,739. 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 -11,739. 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 7,644. 11,478. -3,834.Totals for all transactions reported on Form(s) 8949 with Box E checked . . . . . . . . . . . . . . . . . . 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13

14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 

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

-3,834.

14

15

Schedule D (Form 1040) 2022 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -15,573. • 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.

# 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 Attachment Sequence No. 12A

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

Social security number or taxpayer identification number

280-33-9458

S NANTHAN & T MOHAMED SAHUL HAMEED

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

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss) (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired disposed of (sales price) from column (d) and and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (a) Code(s) from Amount of adjustment instructions. with column (a). instructions AMERITRADE 01/01/22 12/31/22 141,383. 167,610. W 14,488. -11,739. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

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.

141,383.

14,488.

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) .

167,610.

Form 8949 (2022) Attachment Sequence No. **12A** Page **2** 

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side S NANTHAN & T MOHAMED SAHUL HAMEED

Social security number or taxpayer identification number 280-33-9458

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.

<ul><li>✗ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on	Form(s) 1099	-B showing bas	'		`	e)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(d) Cost or other basis Proceeds See the Note below		if any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Ćo.)	(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).
AMERITRADE	01/01/21	12/31/22	7,644.	11,478.			-3,834.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 8b (if Box D above	al here and inc	lude on your					

**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.

above is checked), or line 10 (if Box F above is checked) .

-3,834.

7,644.

11,478.

#### **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.

OMB No. 1545-0074

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

S NA	HOM T & NAHTNA	AMED SAHUL HAMEED						280-3	3-9458	
Par		Loss From Rental Real Estate an								
	Note: If you are	e in the business of renting personal proper or loss from <b>Form 4835</b> on page 2, line 40.	ty, use	Schedule	<b>C</b> . See	instru	ctions. If you ar	e an indi	vidual, rep	ort farm
<b>A</b> I		syments in 2022 that would require you	to file	Form(s) 1	naa2 S	Saa ins	etructions		□ Ve	e X No
					• •	• •				
1a		of each property (street, city, state, ZIF		*)						
Α	PALLIKARANAI	CHENNAI TAMILNADU IN 600	)100							
В										
С										<u> </u>
1b	Type of Property	2 For each rental real estate prope				Fa	ir Rental	Person		QJV
_	(from list below)	above, report the number of fair personal use days. Check the Qu			_		Days	Da		
A_	3	if you meet the requirements to f			A		365		0	
B		qualified joint venture. See instru			B C					
	of Dropouts				C					
	of Property: Single Family Reside	ence 3 Vacation/Short-Term Ren	tal	5 Land	ı	7	Self-Rental			
	Multi-Family Reside		lai	6 Roya				ho)		
	ividiti-i arrilly rieside	HICE 4 COMMERCIAL		O HOya	111103	0	Other (descri			
							Propertie	es:		
Incon					Α		В			С
3			3		5	20.				
4			4							
Expe			_							
5	_		5							
6	•	e instructions)	6		1 2	<b>CO</b>				
7		tenance	7		1,3	60.				
8 9			8							
10		ofessional fees	10							
11			11		1,0	60				
12		paid to banks, etc. (see instructions)	12		Ι, υ	00.				
13			13							
14			14		4.1	50.				
15			15			90.				
16			16		<u> </u>					
17			17		3,2	10.				
18	Depreciation exper	nse or depletion	18							
19	Other (list)		19							
20	Total expenses. Ac	dd lines 5 through 19	20		13,6	70.				
21		om line 3 (rents) and/or 4 (royalties). If								
		ee instructions to find out if you must			10 -	_				
			21	-	-13,1	50.				
22		real estate loss after limitation, if any,		,	10 1-	. ,	1		,	
00	·	e instructions)	22	(	13,15		(	)	(	
23a		s reported on line 3 for all rental prope				23a		520.		
b		s reported on line 4 for all royalty prop	erties			23b				
c d		s reported on line 12 for all properties s reported on line 18 for all properties				23c 23d				
e e		s reported on line 20 for all properties				23e	12	,670.		
24		itive amounts shown on line 21. <b>Do no</b>		de anvilo		236	13	24		
25	·	y losses from line 21 and rental real estat		-		nter to	tal losses her		(	13,150.
26		estate and royalty income or (loss).								,
20		I, IV, and line 40 on page 2 do not								
		1040), line 5. Otherwise, include this ar						26		-13.150

# 8959 Form

Department of the Treasury Internal Revenue Service

### **Additional Medicare Tax**

If any line does not apply to you, leave it blank. See separate instructions.

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

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2022

Attachment Sequence No. 71

Name(s) shown on return

Your social security number

S N.	ANTHAN & T MOHAMED SAHUL HAMEED		280	1-33-9	458
Par	Additional Medicare Tax on Medicare Wages				
1	Medicare wages and tips from Form W-2, box 5. If you have more than one				
	Form W-2, enter the total of the amounts from box 5	1	258,753	3.	
2	Unreported tips from Form 4137, line 6	2			
3	Wages from Form 8919, line 6	3			
4	Add lines 1 through 3	4	258,753	3.	
5	Enter the following amount for your filing status:				
	Married filing jointly				
	Married filing separately	_	0.50		
_	Single, Head of household, or Qualifying surviving spouse \$200,000	5	250,00		
6	Subtract line 5 from line 4. If zero or less, enter -0				8,753.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009).				70
Dord	Part II			. 7	79.
Pari			1		1
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)	8			
9	Enter the following amount for your filing status:	0		_	
Э	Married filing jointly				
	Married filing separately				
	Single, Head of household, or Qualifying surviving spouse \$200,000	9			
10	Enter the amount from line 4	10			
11	Subtract line 10 from line 9. If zero or less, enter -0	11			
12	Subtract line 11 from line 8. If zero or less, enter -0			. 12	
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (				
	go to Part III			I	
Part					'
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14				
	(see instructions)	14			
15	Enter the following amount for your filing status:				
	Married filing jointly				
	Married filing separately \$125,000				
	Single, Head of household, or Qualifying surviving spouse \$200,000	15			
16	Subtract line 15 from line 14. If zero or less, enter -0				
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply lin				
D	Enter here and go to Part IV			.   17	
Part			(=	_	
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), I				
Part	or 1040-SS filers, see instructions), and go to Part V	• •		. 18	79.
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6	19	3,752	,	
20	Enter the amount from line 1	20	258,753		
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax		230,73.	<del>-</del>	
21	withholding on Medicare wages	21	3,752	,	
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Ado				
	withholding on Medicare wages				0.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensatio				1
	14 (see instructions)				
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also incl				
	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 2				
	1040-SS filers, see instructions)				0.

BAA