(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

Subm	nission Identification Number (SID)				
Taxpay	ver's name	Social securit	y number	•	
FNU	J NADIA AHMED	003-87-	-2033		
Spouse	o's name	Spouse's soc	ial securit	ty number	
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Ente	r year you a	re auth	orizing.)	
	whole dollars only on lines 1 through 5.	, ,		<u> </u>	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	236,	952.
2	Total tax		2	50,	777.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	59 ,	446.
4	Amount you want refunded to you		4	8,	669.
5	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of yo	ur returr	າ)
return to sen for any Agent payme author payme busine taxes persor	conveledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abort (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmount of my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject of value of the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recessed days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the poinc Funds Withdrawal Consent.	nitter, or electro- iection of the tr J.S. Treasury and dicated in the ta- ion to debit the ee the authoriza- quests must be e processing of payment. I furt	onic returnansmission dits des ax prepara entry to ation. To expression the election at the election at the election at the election acknowledges at the election acknowledges at the election at the election acknowledges	rn originato ion, (b) the signated Fi ration softw this accour revoke (ca d no later stronic payr nowledge ti	r (ERO) reason inancial vare for nt. This ancel) a than 2 ment of hat the
	ayer's PIN: check one box only				
	▼ I authorize GLOBAL TAXES LLC to enter or generate	my PIN 7	2 0	3 3	as my
~	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	ter five diq n't enter a	gits, but	as my
	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 methodow.				
Your	signature ▶ Date ▶				
Snou	se's PIN: check one box only				
Spou		my DINI			00 mv
L	I authorize to enter or generate to enter or generate	_	er five did		as my
	signature on the income tax return (original or amended) I am now authorizing.		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 methodow.				
Spou	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	/			
Part	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 4 9 Don't ente		3 2 7 ps	1
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income to rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of I	nitting this retu	ırn in acc	cordance w	
EDO?	o dignatura N				
EKU'	s signature ► Date ► ERO Must Retain This Form — See Instructions				
	EKU IVIUST KETAIN I NIS FORM — See INSTRUCTIONS				

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

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2023

OMB No. 1545-0074

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

For the year Jan.	1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ling _			, 20		See se	parate in:	structions.	
Your first name	and mi	iddle initial	Last na	ame						Your so	ocial secur	rity number	
FNU			NAD.	IA AHMED							87 2	-	
	ouse's	s first name and middle initial	Last n									ecurity number	
											1 1	•	
Home address	numbe	er and street). If you have a P.O. box, see	instruct	tions.				Apt. no.		Preside	ntial Elec	tion Campaigr	
7628 LIS		, ,						331	İ		here if you		
		ce. If you have a foreign address, also co	mplete	spaces below.	Sta	ate	ZIP c			spouse if filing jointly, want \$3			
MIDDLETC			·		l w	Т	535				o this fund low will no	d. Checking a	
Foreign country				Foreign province/state/				gn postal c	code		x or refund	0	
o ,				5 1				5 1		,	You	_	
Filing Status	X	Single				☐ Head of h	user	old (HOI	H)				
_		Married filing jointly (even if only or	ne had	income)					,				
Check only one box.		Married filing separately (MFS)		,		☐ Qualifying	survi	ving spo	use (QSS)			
one box.	If v	you checked the MFS box, enter the	name	of your spouse. If you	u che						ild's nam	e if the	
	-	alifying person is a child but not you		ndont:									
<u></u>	^+	time - di 0000 did (-)	-: /										
Digital Assets		ny time during 2023, did you: (a) rece lange, or otherwise dispose of a digi			-		-				Yes	s 🗵 No	
Standard		eone can claim: You as a de), (O	00 1110010	011011	J.,			
Deduction		Spouse itemizes on a separate return	•	·		•							
		· <u> </u>			unoi								
Age/Blindness	You:	Were born before January 2, 1	959	Are blind Spo	ouse	: U Was bor	n bef	ore Janu	ary 2	, 1959	ls b	blind	
Dependents				(2) Social security	′	(3) Relationsh	nip (-				ee instructions):	
If more	(1) F	irst name Last name		number		to you		Child t	tax cr	edit	Credit for c	other dependents	
than four									<u> </u>			<u> </u>	
dependents, see instructions	. —								<u>Ц</u>			<u> </u>	
and check									<u> </u>			<u> </u>	
here \square											<u> </u>		
Income	1a	Total amount from Form(s) W-2, be	•	,						1a		261,705.	
Attach Form(s)	b	Household employee wages not re		, ,						1b			
W-2 here. Also	C	Tip income not reported on line 1a	•	•						10			
attach Forms W-2G and	d	Medicaid waiver payments not rep		, , , ,	nstru	uctions)				10			
1099-R if tax	е	Taxable dependent care benefits f		•						1e			
was withheld.	f	Employer-provided adoption bene								1f			
If you did not get a Form	g	Wages from Form 8919, line 6 .								10		0.	
W-2, see	h	Other earned income (see instructi	,				· ·			1h	1	0.	
instructions.	i	Nontaxable combat pay election (s	see ins	tructions)		<u>li</u>					_	261,705.	
		Add lines 1a through 1h			 L T					1z		<u>.01, 703.</u>	
Attach Sch. B if required.	2a	· -	2a	19.		axable interest				2b		23.	
	3a_		3a			Ordinary divide				3b			
Standard	4a		4a			axable amoun axable amoun				4b			
Deduction for—	5a	_	5a 6a			axable amoun				5b			
Single or Married filing	6a	,		mathad abaak bara			ι				<u>'</u>		
separately, \$13,850	с 7	If you elect to use the lump-sum e		*	`	,				7		-73.	
Married filing	8	Capital gain or (loss). Attach Sched Additional income from Schedule							. ∟	8		-/3. -18 , 203.	
jointly or Qualifying	9		-							9		243,452.	
surviving spouse, \$27,700			d lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income									6,500.	
Head of	10	Subtract line 10 from line 9. This is								10		236,952.	
household, \$20,800	11 12	Standard deduction or itemized	•							12		13,850.	
If you checked any box under	13	Qualified business income deducti		,	,	 95-Δ				13		<u> </u>	
Standard	14	Add lines 12 and 13	.011 1101		000	ю д				14		13,850.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or le	 ss enter-0- This is v	our	taxable incom	 ne			15		223,102.	

Form 1040 (2023	3)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	50,222.
Credits	17	Amount from Schedule 2, lin	ne 3						17	
	18	Add lines 16 and 17							18	50,222.
	19	Child tax credit or credit for	other dependen	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	3. If zero or less,	enter -0					22	50,222.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21				23	555.
	24	Add lines 22 and 23. This is	your total tax						24	50,777.
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25a	58 ,	891.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c		555.		
	d	Add lines 25a through 25c							25d	59,446.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	22 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	ayments and refu	undable d	redits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	59,446.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you ov	erpaid		34	8,669.
	35a									8,669.
Direct deposit?	b	Routing number 1 1 1			c Type: 🛛 🗙	Checkin	g	avings		
See instructions.	d	Account number 8 7 5	3 8 3 9	8 1						
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24	. This is the am	ount you owe.						
You Owe		For details on how to pay, g	o to www.irs.go	//Payments or	see instructions .				37	
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party		you want to allow another	person to disc	cuss this retu	n with the IRS?	_				
Designee	ins	structions				🗀	Yes. Cor	•		⊠ No
	De nai	signee's ne		Phone no.			Persor numbe	nal identif er (PIN)	ication	
Cian		der penalties of perjury, I declare the	hat I have examine		accompanying sche	dules and		, ,	ne best	of my knowledge and
Sign		ief, they are true, correct, and com								
Here	Yo	ur signature		Date	Your occupation			If the	IRS se	nt you an Identity
					·					IN, enter it here
Joint return?					SOFTWARE I		ER	(see		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupat	ion				nt your spouse an ection PIN, enter it here
your records.								(see	inst.)	
	Ph	one no. (832) 441-514	9	Email address	NADIA.AHMEI	D05@GMZ	IL.COM	I		
Paid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:
Preparer	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAC	GAR GUPTA	04/15	/2024 I	202082	2703	Self-employed
Use Only	Fir	m's name GLOBAL TA	XES LLC					Phor	e no.	(678) 965-9522
Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm								Firm	s EIN	84-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

FNU NADIA AHMED

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.

Your social security number 003-87-2033

Par	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. Att	ach Schedule E .	5	-18,203.
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		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			
_	1040, line 1a or 1d	8s (4	
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:			
_	Total ather income. Add lines On through On	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente 1040, 1040-SR, or 1040-NR, line 8			_10 202
	1040, 1040-30, 01 1040-110, 11116 0		10	-18,203.

Schedule 1 (Form 1040) 2023 Page **2**

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government	t	
	officials. Attach Form 2106		
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		
16	Self-employed SEP, SIMPLE, and qualified plans		
17	Self-employed health insurance deduction		
18	Penalty on early withdrawal of savings		
19a	Alimony paid		
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	6,500.
21	Student loan interest deduction		
22	Reserved for future use		
23	Archer MSA deduction	23	
24	Other adjustments:		
а	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		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m	_	
d	Reforestation amortization and expenses	_	
е	Repayment of supplemental unemployment benefits under the Trade		
_	Act of 1974	_	
f	Contributions to section 501(c)(18)(D) pension plans	_	
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)	_	
İ	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		
	<u> </u>	-	
j	Housing deduction from Form 2555	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
_	1041)	-	
Z	Other adjustments. List type and amount:		
25	Total other adjustments. Add lines 24s through 24z	25	
25 26	Total other adjustments. Add lines 24a through 24z		
20	Form 1040, 1040-SR, or 1040-NR, line 10	26	6,500.
	1 OIII 10 70, 10 70 OII, OI 10 70 IVII, IIIIO 10	20	0,000.

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

2023

Attachment
Sequence No. 02

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

Your social security number 003-87-2033

Pa	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 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	555.
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	
	(co	ontinu	ued on page 2)

Schedule 2 (Form 1040) 2023 Page **2**

Part II Other Taxes (continued)

7	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	-	
a	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	47		
h	fractional interest in tangible personal property	17g	-	
"	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	17 j		
k	Golden parachute payments	17k		
I	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated	17m		
n	corporation	17m	-	
	8697 or 8866	17n		
ο	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	170		
~	Any interest from Form 8621, line 24	17p 17q		
4	Any other taxes. List type and amount:	174		
Z	Any other taxes. List type and amount.	17z		
8	Total additional taxes. Add lines 17a through 17z		18	
9	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 total other taxe			
	on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21	555.

SCHEDULE D (Form 1040)

Department of the Treasury

Capital Gains and Losses

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Go to www.irs.gov/ScheduleD for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. **12**

Intern	al Revenue Service	Go to www.irs.gov/ScheduleD fo	or instructions and	the latest informat	ion.		8	Sequence No. 12
	(s) shown on return U NADIA AHME	ID				Your so		curity number
-	•	y investment(s) in a qualified opportunity 8949 and see its instructions for additiona	_	-	_	No oss.		
Pa	rt I Short-T	erm Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Les	s (se	e ins	tructions)
lines This	below. form may be eas	ow to figure the amounts to enter on the ier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	Adjustments Sub to gain or loss from from			(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
whol	e dollars.			,		2, column		with column (g)
1a 	1099-B for whic which you hav However, if you	ort-term transactions reported on Form h basis was reported to the IRS and for e no adjustments (see instructions). choose to report all these transactions eave this line blank and go to line 1b.						
1b	Totals for all tran	nsactions reported on Form(s) 8949 with						
2	Totals for all tran	nsactions reported on Form(s) 8949 with						
3	Totals for all tran	nsactions reported on Form(s) 8949 with						
4	Short-term gain	from Form 6252 and short-term gain or (lo	oss) from Forms 4	684, 6781, and 88	324	[4	
5		gain or (loss) from partnerships,	•	estates, and tr	usts 	from 	5	
6	Short-term capit Worksheet in th	al loss carryover. Enter the amount, if an	•	-	-	over	6	(
7	Net short-term	capital gain or (loss). Combine lines 1a is or losses, go to Part II below. Otherwise	through 6 in colu	ımn (h). If you have	e any I		7	
Par		erm Capital Gains and Losses—Ger					see i	nstructions)
See	instructions for he below.	ow to figure the amounts to enter on the	(d)	(e)	Ad	(g) ljustment	s	(h) Gain or (loss) Subtract column (e)
This		ier to complete if you round off cents to	Proceeds (sales price)	Cost (or other basis)	to gain	n or loss s) 8949, P 2, column	from art II,	from column (d) and combine the result with column (g)
8a	1099-B for whic which you hav However, if you	ng-term transactions reported on Form h basis was reported to the IRS and for e no adjustments (see instructions). choose to report all these transactions eave this line blank and go to line 8b.						
8b		nsactions reported on Form(s) 8949 with	0	2.4				2.4
9		nsactions reported on Form(s) 8949 with	0.	24.				-24.
10	Totals for all tran	nsactions reported on Form(s) 8949 with	7.	56.				-49.
11	Gain from Form	4797, Part I; long-term gain from Forms 4, 6781, and 8824				(loss)	11	
12		ain or (loss) from partnerships, S corporat				 K-1	12	
							13	
	Long-term capit	al loss carryover. Enter the amount, if any				+		
	Worksheet in th						14	(

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

-73.

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -73. • 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 73.) 21 • (\$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 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.

Form 8949 (2023) 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 $\texttt{FNU} \ \ \mathsf{NADIA} \ \ \mathsf{AHMED}$

Social security number or taxpayer identification number 003-87-2033

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.

1 (a) Description of property	(b) Date acquired	(c) Date sold or		(e) Cost or other basis See the Note below	Adjustment, if If you enter an enter a co See the sepa	(h) Gain or (loss) Subtract column (e) from column (d) and		
(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	combine the result with column (g).	
Robinhood Securities LLC	01/01/23	12/31/23	0.	24.			-24.	
2 Totals. Add the amounts in columns	(d) (o) (d) and	d (h) (authira at						

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) .

0.

24.

Form 8949 (2023) 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 FNU NADIA AHMED

Social security number or taxpayer identification number 003-87-2033

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 reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- 区 (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

	not reported	to you on i c	1111 1099-D				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Crypto LLC	01/01/22	12/31/23	7.	56.			-49.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box I	I here and inc is checked), lir	lude on your ne 9 (if Box E	7.	56.			-49.

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 E (Form 1040)

Supplemental Income and Loss

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

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

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 003-87-2033 FNU NADIA AHMED

Part	Note: If you are in the business of renting personal proper			C. See	instru	ctions. If you a	are an individ	dual, repo	ort farm	1
A [rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you	to file	Form(e) 10	997 9	See inc	structions		□ Va	• X	No
	f "Yes," did you or will you file required Form(s) 1099?									
 1a	Physical address of each property (street, city, state, ZIF								<u> </u>	
A	PLOT NO 24 , CHANDULAL BOW SIKH VILLAG			חומ	ח ביו	ANICANIA TN	T 50000			
В	PLOT NO 24 , CHANDOLAL BOW SIRH VILLAG	1C 71	ECONDERA	MAD,	, 161	ANGANA II	1 30009			
C										
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair in the following state of the fo				Fa	ir Rental Days	Persona Day		QJ	IV
Α	personal use days. Check the Qu	JV bo	x only	Α		365	,	0	Г	1
В	if you meet the requirements to f			В						i
С	qualified joint venture. See instru	ctions	S. –	С						<u> </u>
уре	of Property:									
	Single Family Residence 3 Vacation/Short-Term Rent Multi-Family Residence 4 Commercial	tal	5 Land 6 Royalt	ies		Self-Rental Other (desc	ribe)			
						Properti	es:			
ncom	ne:		A	4		В			С	
3	Rents received	3		6	25.					
4	Royalties received	4								
xper										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,8	45.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10		1 0	0.0					
11	Management fees	11 12		1,2	00.					
12	Mortgage interest paid to banks, etc. (see instructions) Other interest	13								
13 14	Repairs	14		3 0	61.					
15	Supplies	15			17.					
16	Taxes	16		3,3	± / •					
17	Utilities	17		4.2	36.					
18	Depreciation expense or depletion	18			69.					
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20	1	18,8	28.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21		18,2						
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22			3.)	()(
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		625.			
b	Total of all amounts reported on line 4 for all royalty properties.	erties			23b					
С	Total of all amounts reported on line 12 for all properties				23c					
d					23d		,369.			
е	Total of all amounts reported on line 20 for all properties				23e	18	,828.			
24	Income. Add positive amounts shown on line 21. Do not		•				. 24			
25	Losses. Add royalty losses from line 21 and rental real estate								18,20	13.)
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this ar						on . 26	-	-18 , 2	203.

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, or 1040-SS.

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

OMB No. 1545-0074

2023

Attachment Sequence No. 71

Name(s) shown on return
FNU NADIA AHMED

Your social security number 003-87-2033

Part	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		
2	Unreported tips from Form 4137, line 6		
3	Wages from Form 8919, line 6		
4	Add lines 1 through 3		
5	Enter the following amount for your filing status:		
	Married filing jointly		
	Married filing separately		
	Single, Head of household, or Qualifying surviving spouse \$200,000 5 200,000.		
6	Subtract line 5 from line 4. If zero or less, enter -0	6	61,704.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II	7	555.
Part			
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you		
_	had a loss, enter -0		
9	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 9		
10	Enter the amount from line 4		
11	Subtract line 10 from line 9. If zero or less, enter -0		
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% (0.009). Enter here and		
	go to Part III	13	
Part			
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14		
45	(see instructions)	-	
15	Enter the following amount for your filing status:		
	Married filing jointly		
	Single, Head of household, or Qualifying surviving spouse \$200,000		
16	Subtract line 15 from line 14. If zero or less, enter -0	16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009).	-10	
17	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), line 11 (Form 1040-SS		
	filers, see instructions), and go to Part V	18	555.
Part		•	
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		
20	Enter the amount from line 1		
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages		
20	withholding on Medicare wages		
22	withholding on Medicare wages	22	EEE
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box		555.
23	14 (see instructions)	23	
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with		
4 7	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-SS filers,		
	see instructions)	24	555.

BAA

Net Investment Income Tax— Individuals, Estates, and Trusts

Department of the Treasury Internal Revenue Service Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.

2023 Attachment Sequence No. 72

OMB No. 1545-2227

Name(s) shown on your tax return Your social security number or EIN FNU NADIA AHMED 003-87-2033 Part I Investment Income ☐ Section 6013(g) election (see instructions) ☐ Section 6013(h) election (see instructions) ☐ Regulations section 1.1411-10(g) election (see instructions) 1 2 2 23. 3 3 Rental real estate, royalties, partnerships, S corporations, trusts, trades or 4a -18,203.Adjustment for net income or loss derived in the ordinary course of a nonsection 1411 trade or business (see instructions) 4b 4c -18,203. Net gain or loss from disposition of property (see instructions) -73. 5a 5a Net gain or loss from disposition of property that is not subject to net 5b Adjustment from disposition of partnership interest or S corporation stock (see 5d -73. 6 Adjustments to investment income for certain CFCs and PFICs (see instructions) 6 7 7 Other modifications to investment income (see instructions) Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7. 8 **-18,253** Part II Investment Expenses Allocable to Investment Income and Modifications State, local, and foreign income tax (see instructions) 9b Miscellaneous investment expenses (see instructions) . . 9c 9d 10 10 Total deductions and modifications. Add lines 9d and 10 11 11 Part III Tax Computation Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. 12 12 0. Individuals: Modified adjusted gross income (see instructions) 13 236,952. 14 200,000. 15 Subtract line 14 from line 13. If zero or less, enter -0- 15 36,952. 16 16 0. Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include 17 17 0. **Estates and Trusts:** Deductions for distributions of net investment income and charitable 18b Undistributed net investment income. Subtract line 18b from line 18a (see 18c 19a Highest tax bracket for estates and trusts for the year (see instructions) . . . 19b Subtract line 19b from line 19a. If zero or less, enter -0- 19c 20 20 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and 21 21

BAA

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

2023 Attachment Sequence No. 179

OMB No. 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number FNU NADIA AHMED Sch E PLOT NO 24 , CHANDULAL BOW 003-87-2033 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 1,160,000. 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2,890,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. SIL g 25-year property h Residential rental 27.5 yrs. MM S/L 01/23 125,370. 4,369 27.5 yrs. S/L property MM 39 yrs. ММ S/L i Nonresidential real S/L property MM Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs. S/L **b** 12-year 30 yrs. ММ S/L c 30-year ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 . 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 4,369. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.