

**FOR TAX YEAR 2023**

SHASHI & PARVATI SINGH

ADVANTAGE ONE PARTNERS INC  
20610 QUARTERPATH TRACE CIRCLE  
Sterling, VA 20165  
(888)692-6829

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning \_\_\_\_\_, 2023, ending \_\_\_\_\_ See separate instructions.

Your first name and middle initial <b>SHASHI</b>	Last name <b>SINGH</b>	Your social security number <b>658-44-0842</b>
If joint return, spouse's first name and middle initial <b>PARVATI</b>	Last name <b>SINGH</b>	Spouse's social security number <b>823-88-5932</b>
Home address (number and street). If you have a P.O. box, see instructions. <b>3309 ARBOR CREEK LN</b>		Apt. no.
City, town, or post office. If you have a foreign address, also complete spaces below. <b>FLOWER MOUND</b>		State <b>TX</b>
Foreign country name		ZIP code <b>75022</b>
Foreign province/state/county		Foreign postal code

You  Spouse

**Filing Status**  Single  Head of household (HOH)

Check only one box.  Married filing jointly (even if only one had income)  Qualifying surviving spouse (QSS)

Married filing separately (MFS)

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: \_\_\_\_\_

**Digital Assets** At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) . . .  Yes  No

**Standard Deduction** **Someone can claim:**  You as a dependent  Your spouse as a dependent

Spouse itemizes on a separate return or you were a dual-status alien

**Age/Blindness** You:  Were born before January 2, 1959  Are blind **Spouse:**  Was born before January 2, 1959  Is blind

**Dependents** (see instructions):

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check if qualifies for (see instructions):
			Child tax credit	Credit for other dependents
<b>HARSH</b>	<b>SINGH</b>	<b>944-91-7606</b>	<b>SON</b>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<b>YASH</b>	<b>SINGH</b>	<b>944-91-7616</b>	<b>SON</b>	<input type="checkbox"/> <input checked="" type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>

**Income**

<b>1a</b> Total amount from Form(s) W-2, box 1 (see instructions) . . . . .	<b>1a</b>	<b>164,102</b>
<b>b</b> Household employee wages not reported on Form(s) W-2 . . . . .	<b>1b</b>	
<b>c</b> Tip income not reported on line 1a (see instructions) . . . . .	<b>1c</b>	
<b>d</b> Medicaid waiver payments not reported on Form(s) W-2 (see instructions) . . . . .	<b>1d</b>	
<b>e</b> Taxable dependent care benefits from Form 2441, line 26 . . . . .	<b>1e</b>	
<b>f</b> Employer-provided adoption benefits from Form 8839, line 29 . . . . .	<b>1f</b>	
<b>g</b> Wages from Form 8919, line 6 . . . . .	<b>1g</b>	
<b>h</b> Other earned income (see instructions) . . . . .	<b>1h</b>	
<b>i</b> Nontaxable combat pay election (see instructions) . . . . . <b>1i</b>		
<b>z</b> Add lines 1a through 1h . . . . .	<b>1z</b>	<b>164,102</b>
<b>2a</b> Tax-exempt interest . . . . . <b>2a</b>	<b>2b</b> Taxable interest . . . . .	<b>9</b>
<b>3a</b> Qualified dividends . . . . . <b>3a</b> <b>7</b>	<b>2b</b> Ordinary dividends . . . . .	<b>8</b>
<b>4a</b> IRA distributions . . . . . <b>4a</b>	<b>4b</b> Taxable amount . . . . .	
<b>5a</b> Pensions and annuities . . . . . <b>5a</b>	<b>5b</b> Taxable amount . . . . .	
<b>6a</b> Social security benefits . . . . . <b>6a</b>	<b>6b</b> Taxable amount . . . . .	
<b>c</b> If you elect to use the lump-sum election method, check here (see instructions) . . . . . <input type="checkbox"/>		
<b>7</b> Capital gain or (loss). Attach Schedule D if required. If not required, check here . . . . . <input type="checkbox"/>	<b>7</b>	<b>(3,000)</b>
<b>8</b> Additional income from Schedule 1, line 10 . . . . .	<b>8</b>	<b>1</b>
<b>9</b> Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b> . . . . .	<b>9</b>	<b>161,120</b>
<b>10</b> Adjustments to income from Schedule 1, line 26 . . . . .	<b>10</b>	
<b>11</b> Subtract line 10 from line 9. This is your <b>adjusted gross income</b> . . . . .	<b>11</b>	<b>161,120</b>
<b>12</b> <b>Standard deduction or itemized deductions</b> (from Schedule A) . . . . .	<b>12</b>	<b>29,036</b>
<b>13</b> Qualified business income deduction from Form 8995 or Form 8995-A . . . . .	<b>13</b>	
<b>14</b> Add lines 12 and 13 . . . . .	<b>14</b>	<b>29,036</b>
<b>15</b> Subtract line 14 from line 11. If zero or less, enter -0-. This is your <b>taxable income</b> . . . . .	<b>15</b>	<b>132,084</b>



**SCHEDULE 1  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Income and Adjustments to Income**

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

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2023**

Attachment  
Sequence No. **01**

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

SHASHI & PARVATI SINGH

Your social security number

658-44-0842

**Part I Additional Income**

<b>1</b>	Taxable refunds, credits, or offsets of state and local income taxes		<b>1</b>	
<b>2a</b>	Alimony received		<b>2a</b>	
<b>b</b>	Date of original divorce or separation agreement (see instructions):			
<b>3</b>	Business income or (loss). Attach Schedule C		<b>3</b>	
<b>4</b>	Other gains or (losses). Attach Form 4797		<b>4</b>	
<b>5</b>	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		<b>5</b>	
<b>6</b>	Farm income or (loss). Attach Schedule F		<b>6</b>	
<b>7</b>	Unemployment compensation		<b>7</b>	
<b>8</b>	Other income:			
<b>a</b>	Net operating loss	<b>8a</b> ( )		
<b>b</b>	Gambling	<b>8b</b>		
<b>c</b>	Cancellation of debt	<b>8c</b>		
<b>d</b>	Foreign earned income exclusion from Form 2555	<b>8d</b> ( )		
<b>e</b>	Income from Form 8853	<b>8e</b>		
<b>f</b>	Income from Form 8889	<b>8f</b>		
<b>g</b>	Alaska Permanent Fund dividends	<b>8g</b>		
<b>h</b>	Jury duty pay	<b>8h</b>		
<b>i</b>	Prizes and awards	<b>8i</b>		
<b>j</b>	Activity not engaged in for profit income	<b>8j</b>		
<b>k</b>	Stock options	<b>8k</b>		
<b>l</b>	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	<b>8l</b>		
<b>m</b>	Olympic and Paralympic medals and USOC prize money (see instructions)	<b>8m</b>		
<b>n</b>	Section 951(a) inclusion (see instructions)	<b>8n</b>		
<b>o</b>	Section 951A(a) inclusion (see instructions)	<b>8o</b>		
<b>p</b>	Section 461(l) excess business loss adjustment	<b>8p</b>		
<b>q</b>	Taxable distributions from an ABLÉ account (see instructions)	<b>8q</b>		
<b>r</b>	Scholarship and fellowship grants not reported on Form W-2	<b>8r</b>		
<b>s</b>	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	<b>8s</b> ( )		
<b>t</b>	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	<b>8t</b>		
<b>u</b>	Wages earned while incarcerated	<b>8u</b>		
<b>z</b>	Other income. List type and amount:	<b>8z</b>		
	<b>SUBSTITUTE PMT</b>		<b>1</b>	
<b>9</b>	Total other income. Add lines 8a through 8z		<b>9</b>	<b>1</b>
<b>10</b>	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8		<b>10</b>	<b>1</b>

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

Schedule 1 (Form 1040) 2023

**Part II Adjustments to Income**

<b>11</b>	Educator expenses . . . . .		<b>11</b>	
<b>12</b>	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 . . . . .		<b>12</b>	
<b>13</b>	Health savings account deduction. Attach Form 8889 . . . . .		<b>13</b>	
<b>14</b>	Moving expenses for members of the Armed Forces. Attach Form 3903 . . . . .		<b>14</b>	
<b>15</b>	Deductible part of self-employment tax. Attach Schedule SE . . . . .		<b>15</b>	
<b>16</b>	Self-employed SEP, SIMPLE, and qualified plans . . . . .		<b>16</b>	
<b>17</b>	Self-employed health insurance deduction . . . . .		<b>17</b>	
<b>18</b>	Penalty on early withdrawal of savings . . . . .		<b>18</b>	
<b>19a</b>	Alimony paid . . . . .		<b>19a</b>	
<b>b</b>	Recipient's SSN . . . . .			
<b>c</b>	Date of original divorce or separation agreement (see instructions): _____			
<b>20</b>	IRA deduction . . . . .		<b>20</b>	
<b>21</b>	Student loan interest deduction . . . . .		<b>21</b>	
<b>22</b>	Reserved for future use . . . . .		<b>22</b>	
<b>23</b>	Archer MSA deduction . . . . .		<b>23</b>	
<b>24</b>	Other adjustments:			
<b>a</b>	Jury duty pay (see instructions) . . . . .	<b>24a</b>		
<b>b</b>	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit . . . . .	<b>24b</b>		
<b>c</b>	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m . . . . .	<b>24c</b>		
<b>d</b>	Reforestation amortization and expenses . . . . .	<b>24d</b>		
<b>e</b>	Repayment of supplemental unemployment benefits under the Trade Act of 1974 . . . . .	<b>24e</b>		
<b>f</b>	Contributions to section 501(c)(18)(D) pension plans . . . . .	<b>24f</b>		
<b>g</b>	Contributions by certain chaplains to section 403(b) plans . . . . .	<b>24g</b>		
<b>h</b>	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) . . . . .	<b>24h</b>		
<b>i</b>	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 . . . . .	<b>24i</b>		
<b>j</b>	Housing deduction from Form 2555 . . . . .	<b>24j</b>		
<b>k</b>	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) . . . . .	<b>24k</b>		
<b>z</b>	Other adjustments. List type and amount: _____	<b>24z</b>		
<b>25</b>	Total other adjustments. Add lines 24a through 24z . . . . .		<b>25</b>	
<b>26</b>	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10. . . . .		<b>26</b>	<b>0</b>

**SCHEDULE A**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Itemized Deductions**

Attach to Form 1040 or 1040-SR.

Go to [www.irs.gov/ScheduleA](http://www.irs.gov/ScheduleA) for instructions and the latest information.

**Caution:** If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

**2023**

Attachment  
Sequence No. **07**

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

Your social security number

**SHASHI & PARVATI SINGH**

**658-44-0842**

<b>Medical and Dental Expenses</b>	<b>Caution:</b> Do not include expenses reimbursed or paid by others.			
	1	Medical and dental expenses (see instructions)	1	
	2	Enter amount from Form 1040 or 1040-SR, line 11	2	
	3	Multiply line 2 by 7.5% (0.075)	3	
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-		4
<b>Taxes You Paid</b>	5	State and local taxes.		
	a	State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box <input checked="" type="checkbox"/>	5a	1,726
	b	State and local real estate taxes (see instructions)	5b	7,343
	c	State and local personal property taxes	5c	
	d	Add lines 5a through 5c	5d	9,069
	e	Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)	5e	9,069
	6	Other taxes. List type and amount:	6	
	7	Add lines 5e and 6		7
				9,069
<b>Interest You Paid</b> <small>Caution: Your mortgage interest deduction may be limited. See instructions.</small>	8	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box <input type="checkbox"/>		
	a	Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a	19,967
	b	Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	8b	
	c	Points not reported to you on Form 1098. See instructions for special rules	8c	
	d	Reserved for future use	8d	
	e	Add lines 8a through 8c	8e	19,967
	9	Investment interest. Attach Form 4952 if required. See instructions	9	
	10	Add lines 8e and 9		10
				19,967
<b>Gifts to Charity</b> <small>Caution: If you made a gift and got a benefit for it, see instructions.</small>	11	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	11	
	12	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500.	12	
	13	Carryover from prior year	13	
	14	Add lines 11 through 13		14
<b>Casualty and Theft Losses</b>	15	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions		15
<b>Other Itemized Deductions</b>	16	Other - from list in instructions. List type and amount:		16
<b>Total Itemized Deductions</b>	17	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12	17	29,036
	18	If you elect to itemize deductions even though they are less than your standard deduction, check this box <input type="checkbox"/>		

For Paperwork Reduction Act Notice, see the Instructions for Form 1040.

Schedule A (Form 1040) 2023

**SCHEDULE D**  
**(Form 1040)**

**Capital Gains and Losses**

OMB No. 1545-0074

**2023**

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/ScheduleD) for instructions and the latest information.

Attachment  
Sequence No. **12**

Name(s) shown on return

Your social security number

**SHASHI & PARVATI SINGH**

**658-44-0842**

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?  Yes  No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

**Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less** (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> 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 . . .				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked . . . . .	39,196	40,491	346	(949)
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked . . . . .				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked . . . . .				
<b>4</b> Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . . .				4
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 . . . . .				5
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions . . . . .				6 ( )
<b>7</b> <b>Net short-term capital gain or (loss)</b> . Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2 . . . . .				7 (949)

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> 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 . . .				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked . . . . .	8,209	12,742		(4,533)
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked . . . . .				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked . . . . .				
<b>11</b> Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 . . . . .				11
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 . . . . .				12
<b>13</b> Capital gain distributions. See the instructions . . . . .				13
<b>14</b> Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions . . . . .				14 ( )
<b>15</b> <b>Net long-term capital gain or (loss)</b> . Combine lines 8a through 14 in column (h). Then, go to Part III on page 2 . . . . .				15 (4,533)

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

Schedule D (Form 1040) 2023

**Part III Summary**

<p><b>16</b> Combine lines 7 and 15 and enter the result . . . . .</p> <ul style="list-style-type: none"> <li>• If line 16 is a <b>gain</b>, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.</li> <li>• If line 16 is a <b>loss</b>, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.</li> <li>• If line 16 is <b>zero</b>, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.</li> </ul>	<b>16</b>	<b>( 5,482 )</b>
<p><b>17</b> Are lines 15 and 16 <b>both</b> gains?</p> <p><input type="checkbox"/> <b>Yes.</b> Go to line 18.</p> <p><input type="checkbox"/> <b>No.</b> Skip lines 18 through 21, and go to line 22.</p>		
<p><b>18</b> If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet . . . . .</p>	<b>18</b>	
<p><b>19</b> If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet . . . . .</p>	<b>19</b>	
<p><b>20</b> Are lines 18 and 19 both zero or blank and you are not filing Form 4952?</p> <p><input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 16. <b>Don't</b> complete lines 21 and 22 below.</p> <p><input type="checkbox"/> <b>No.</b> Complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Don't</b> complete lines 21 and 22 below.</p>		
<p><b>21</b> If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of:</p> <ul style="list-style-type: none"> <li>• The loss on line 16; or</li> <li>• (\$3,000), or if married filing separately, (\$1,500)</li> </ul> <p><b>Note:</b> When figuring which amount is smaller, treat both amounts as positive numbers.</p>	<b>21</b>	<b>( 3,000 )</b>
<p><b>22</b> Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?</p> <p><input checked="" type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 16.</p> <p><input type="checkbox"/> <b>No.</b> Complete the rest of Form 1040, 1040-SR, or 1040-NR.</p>		



**Sales and Other Dispositions of Capital Assets**  
 File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.  
 Go to [www.irs.gov/Form8949](http://www.irs.gov/Form8949) for instructions and the latest information.

Name(s) shown on return: **SHASHI & PARVATI SINGH**  
 Social security number or taxpayer identification number: **658-44-0842**

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

**Part I Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

**You must check Box A, B, or C below. Check only one box.** If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (A)** Short-term transactions reported on Form(s) 1099-B showing basis 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

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss)</b> Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	<b>AMERITRADE</b>	VARIOUS	12-31-2023	39,196	40,491	W	346	(949)
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 1b</b> (if <b>Box A</b> above is checked), <b>line 2</b> (if <b>Box B</b> above is checked), or <b>line 3</b> (if <b>Box C</b> above is checked) . . . . .				39,196	40,491		346	(949)

**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.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side <b>SHASHI &amp; PARVATI SINGH</b>	Social security number or taxpayer identification number <b>658-44-0842</b>
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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)
- (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

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss)</b> Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	<b>AMERITRADE</b>	VARIOUS	12-31-2023	6,379	10,782			(4,403)
	<b>ROBINHOOD SECURITIES LLC</b>	VARIOUS	12-31-2023	1,830	1,960			(130)
<b>2 Totals.</b>	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 8b</b> (if <b>Box D</b> above is checked), <b>line 9</b> (if <b>Box E</b> above is checked), or <b>line 10</b> (if <b>Box F</b> above is checked) . . . .			8,209	12,742			(4,533)

**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)**

Department of the Treasury  
Internal Revenue Service

**Credits for Qualifying Children  
and Other Dependents**

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

Go to [www.irs.gov/Schedule8812](http://www.irs.gov/Schedule8812) for instructions and the latest information.

OMB No. 1545-0074

**2023**

Attachment  
Sequence No. **47**

Name(s) shown on return

SHASHI & PARVATI SINGH

Your social security number

658-44-0842

**Part I Child Tax Credit and Credit for Other Dependents**

<b>1</b>	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	<b>1</b>	161,120
<b>2a</b>	Enter income from Puerto Rico that you excluded	<b>2a</b>	
<b>b</b>	Enter the amounts from lines 45 and 50 of your Form 2555	<b>2b</b>	
<b>c</b>	Enter the amount from line 15 of your Form 4563	<b>2c</b>	
<b>d</b>	Add lines 2a through 2c	<b>2d</b>	
<b>3</b>	Add lines 1 and 2d	<b>3</b>	161,120
<b>4</b>	Number of qualifying children under age 17 with the required social security number	<b>4</b>	
<b>5</b>	Multiply line 4 by \$2,000	<b>5</b>	0
<b>6</b>	Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number	<b>6</b>	2
<b>Caution:</b> Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4.			
<b>7</b>	Multiply line 6 by \$500	<b>7</b>	1,000
<b>8</b>	Add lines 5 and 7	<b>8</b>	1,000
<b>9</b>	Enter the amount shown below for your filing status. • Married filing jointly-\$400,000 • All other filing statuses-\$200,000	<b>9</b>	400,000
<b>10</b>	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.	<b>10</b>	0
<b>11</b>	Multiply line 10 by 5% (0.05)	<b>11</b>	
<b>12</b>	Is the amount on line 8 more than the amount on line 11? <input type="checkbox"/> <b>No. STOP.</b> You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27. <input checked="" type="checkbox"/> <b>Yes.</b> Subtract line 11 from line 8. Enter the result.	<b>12</b>	1,000
<b>13</b>	Enter the amount from the <b>Credit Limit Worksheet A</b>	<b>13</b>	19,673
<b>14</b>	Enter the smaller of line 12 or 13. <b>This is your child tax credit and credit for other dependents.</b>	<b>14</b>	1,000

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 **additional child tax credit** on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

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

Schedule 8812 (Form 1040) 2023

EEA

**Part II-A Additional Child Tax Credit for All Filers**

**Caution:** If you file Form 2555, you cannot claim the additional child tax credit.

<b>15</b>	Check this box if you <b>do not</b> want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27. . . . .		
<b>16a</b>	Subtract line 14 from line 12. If zero, <b>stop here</b> ; you cannot take the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27 . . . . .		<b>16a</b> 0
<b>b</b>	Number of qualifying children under 17 with the required social security number: _____ x \$1,600. Enter the result. If zero, <b>stop here</b> ; you cannot claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27 . . . . .		<b>16b</b>
	<b>TIP:</b> The number of children you use for this line is the same as the number of children you used for line 4.		
<b>17</b>	Enter the <b>smaller</b> of line 16a or line 16b . . . . .		<b>17</b>
<b>18a</b>	Earned income (see instructions) . . . . .	<b>18a</b>	
<b>b</b>	Nontaxable combat pay (see instructions) . . . . .	<b>18b</b>	
<b>19</b>	Is the amount on line 18a more than \$2,500? <input type="checkbox"/> <b>No.</b> Leave line 19 blank and enter -0- on line 20. <input type="checkbox"/> <b>Yes.</b> Subtract \$2,500 from the amount on line 18a. Enter the result . . . . .	<b>19</b>	
<b>20</b>	Multiply the amount on line 19 by 15% (0.15) and enter the result . . . . . <b>Next.</b> On line 16b, is the amount \$4,800 or more? <input type="checkbox"/> <b>No.</b> If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the <b>smaller</b> of line 17 or line 20 on line 27. <input type="checkbox"/> <b>Yes.</b> 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.	<b>20</b>	

**Part II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Residents of Puerto Rico**

<b>21</b>	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, or if you are a bona fide resident of Puerto Rico, see instructions . . . . .		
<b>22</b>	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . . . . .	<b>22</b>	
<b>23</b>	Add lines 21 and 22 . . . . .	<b>23</b>	
<b>24</b>	<b>1040 and 1040-SR filers:</b> Enter the total of the amounts from Form 1040 or 1040-SR, line 27, and Schedule 3 (Form 1040), line 11. <b>1040-NR filers:</b> Enter the amount from Schedule 3 (Form 1040), line 11. } . . . . .	<b>24</b>	
<b>25</b>	Subtract line 24 from line 23. If zero or less, enter -0- . . . . .	<b>25</b>	
<b>26</b>	Enter the <b>larger</b> of line 20 or line 25 . . . . . <b>Next,</b> enter the <b>smaller</b> of line 17 or line 26 on line 27.	<b>26</b>	

**Part II-C Additional Child Tax Credit**

<b>27</b>	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28 . . . . .		
		<b>27</b>	0

Credit Limit Worksheet A

Schedule 8812

(This page is not filed with the return. It is for your records only.)

2023

Name(s) as shown on return

Tax ID Number

SHASHI & PARVATI SINGH

658-44-0842

Credit Limit Worksheet A

1. Enter the amount from Line 18 of your Form 1040, 1040-SR, or 1040-NR . . . . . 1. 19,673

2. Add the following amounts (if applicable) from:

- Schedule 3, Line 1 . . . . . + \_\_\_\_\_
- Schedule 3, Line 2 . . . . . + \_\_\_\_\_
- Schedule 3, Line 3 . . . . . + \_\_\_\_\_
- Schedule 3, Line 4 . . . . . + \_\_\_\_\_
- Schedule 3, line 5b . . . . . + \_\_\_\_\_
- Schedule 3, line 6d . . . . . + \_\_\_\_\_
- Schedule 3, line 6f . . . . . + \_\_\_\_\_
- Schedule 3, line 6l . . . . . + \_\_\_\_\_
- Schedule 3, line 6m . . . . . + \_\_\_\_\_

Enter the total. 2. \_\_\_\_\_

3. Subtract line 2 from line 1 . . . . . 3. 19,673

Complete Credit Limit Worksheet B **only** if you meet all of the following.

- 1. You are claiming one or more of the following credits.
  - a. Mortgage interest credit, Form 8396.
  - b. Adoption credit, Form 8839.
  - c. Residential clean energy credit, Form 5695, Part I.
  - d. District of Columbia first-time homebuyer credit, Form 8859.

- 2. You are not filing Form 2555.
- 3. Line 4 of Schedule 8812 is more than zero.

4. If you are **not** completing Credit Limit Worksheet B, enter -0-; otherwise, enter the amount from Credit Limit Worksheet B . . . . . 4. 0

5. Subtract line 4 from line 3. Enter here and on Schedule 8812, line 13 . . . . . 5. 19,673

### 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](http://www.irs.gov/Form8867) for instructions and the latest information.**

Taxpayer name(s) shown on return <b>SHASHI &amp; PARVATI SINGH</b>	Taxpayer identification number <b>658-44-0842</b>
Preparer's name <b>SUMIT PANJABI</b>	Preparer tax identification number <b>P0624311</b>

#### Part I Due Diligence Requirements

Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I-V for the benefit(s) claimed (check all that apply).  EIC  CTC/ACTC/ODC  AOTC  HOH

	Yes	No	N/A
<b>1</b> Did you complete the return based on information for the applicable tax year provided by the taxpayer or reasonably obtained by you? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>2</b> If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 8812 (Form 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit claimed? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>3</b> Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following. • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to 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) and/or HOH filing status and to figure the amount(s) of any credit(s) . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>4</b> Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes," answer questions 4a and 4b. If "No," go to question 5.) . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>a</b> Did you make reasonable inquiries to determine the correct, complete, and consistent information? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	
<b>b</b> Did you contemporaneously document your inquiries? (Documentation should include the questions you asked, whom you asked, when you asked, the information that was provided, and the impact the information had on your preparation of the return.) . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5</b> Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure the amount(s) of the credit(s) . . . . . List those documents provided by the taxpayer, if any, that you relied on: _____ _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>6</b> Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her return is selected for audit? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>7</b> Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year? . . . . . <b>(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>a</b> Did you complete the required recertification Form 8862? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>8</b> If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and correct Schedule C (Form 1040)? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For Paperwork Reduction Act Notice, see separate instructions.

<b>Part II Due Diligence Questions for Returns Claiming EIC</b> (If the return does not claim EIC, go to Part III.)			
	Yes	No	N/A
<b>9a</b> Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? <b>(If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)</b> . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	
<b>b</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? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	
<b>c</b> Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Part III Due Diligence Questions for Returns Claiming CTC/ACTC/ODC</b> (If the return does not claim CTC, ACTC, or ODC, go to Part IV.)			
	Yes	No	N/A
<b>10</b> Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>11</b> 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? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>12</b> 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? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Part IV Due Diligence Questions for Returns Claiming AOTC</b> (If the return does not claim AOTC, go to Part V.)		
	Yes	No
<b>13</b> Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qualified tuition and related expenses for the claimed AOTC? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

<b>Part V Due Diligence Questions for Claiming HOH</b> (If the return does not claim HOH filing status, go to Part VI.)		
	Yes	No
<b>14</b> Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for a qualifying person? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

**Part VI Eligibility Certification**

**You will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filing status on the return of the taxpayer identified above if you:**

- A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responses on the return or in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s);
- B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checklist for any applicable credit(s) claimed and HOH filing status, if claimed;
- 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 8867 instructions under *Document Retention*.
  - 1. A copy of this Form 8867.
  - 2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.
  - 3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).
  - 4. A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s) was obtained.
  - 5. A record of any additional information you relied upon, including questions you asked and the taxpayer's responses, to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).

**If you have not complied with all due diligence requirements, you may have to pay a penalty for each failure to comply related to a claim of an applicable credit or HOH filing status (see instructions for more information).**

<b>15</b> Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and complete? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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		<b>a</b> Employee's social security number <b>658-44-0842</b>		OMB No. 1545-0008		Safe, accurate, FAST! Use		IRS e-file		Visit the IRS website at www.irs.gov/efile	
<b>b</b> Employer identification number (EIN) <b>22-3524303</b>				<b>1</b> Wages, tips, other compensation <b>164,102</b>		<b>2</b> Federal income tax withheld <b>16,067</b>					
<b>c</b> Employer's name, address, and ZIP code <b>LTIMINDTREE LIMITED</b> <b>25 INDEPENDENCE BLVD</b> <b>STE 401</b> <b>WARREN NJ 07059</b>				<b>3</b> Social security wages <b>160,200</b>		<b>4</b> Social security tax withheld <b>9,932</b>					
				<b>5</b> Medicare wages and tips <b>171,871</b>		<b>6</b> Medicare tax withheld <b>2,492</b>					
				<b>7</b> Social security tips		<b>8</b> Allocated tips					
<b>d</b> Control number				<b>9</b>		<b>10</b> Dependent care benefits					
<b>e</b> Employee's first name and initial <b>SHASHI K SINGH</b>		Last name <b>SINGH</b>		Suff.		<b>11</b> Nonqualified plans		<b>12a</b> See instructions for box 12 <b>C</b>   <b>255</b>			
<b>625 PARKWAY BLVD APT 1523</b> <b>COPPELL TX 75019</b>				<b>13</b> Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		<b>12b</b>		<b>D</b>   <b>7,769</b>			
				<b>14</b> Other		<b>12c</b>		<b>DD</b>   <b>15,311</b>			
						<b>12d</b>					
<b>f</b> Employee's address and ZIP code											
<b>15</b> State Employer's state ID number		<b>16</b> State wages, tips, etc.		<b>17</b> State income tax		<b>18</b> Local wages, tips, etc.		<b>19</b> Local income tax		<b>20</b> Locality name	

Form **W-2** Wage and Tax Statement

**2023**

Department of the Treasury-Internal Revenue Service

Copy B - To Be Filed With Employee's FEDERAL Tax Return.  
This information is being furnished to the Internal Revenue Service.

EEA The information on this Form W-2 was used to prepare the taxpayer's 2023 Federal tax return by ADVANTAGE ONE PARTNERS

DRAFT COPY



## Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for participating in IRS *e-file*.

Taxpayer name

**SHASHI & PARVATI SINGH**

Taxpayer address (optional)

**3309 ARBOR CREEK LN**

**FLOWER MOUND, TX 75022**

1.  Your federal income tax return for 2023 was filed electronically with the IRS Submission Processing Center. The electronic filing services were provided by ADVANTAGE ONE PARTNERS INC.
2.  Your return was accepted on \_\_\_\_\_ using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you. The Submission ID assigned to your return is \_\_\_\_\_.
3.  Your return was accepted on \_\_\_\_\_. Allow 4 to 6 weeks for the processing of your return. The Earned Income Credit or a dependent's exemption on your return may be reduced or disallowed due to a child's name and social security number mismatch.
4.  Your electronic funds withdrawal payment request was accepted for processing.
5.  Your electronic funds withdrawal payment request was not accepted for processing. Refer to the "If You Owe Tax" section.
6.  Your Form 4868, Application for Automatic Extension of Time to File U.S. Individual Income Tax Return, was accepted on \_\_\_\_\_. The Submission ID assigned to your extension is \_\_\_\_\_.

**DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS.  
IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

### If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at [www.irs.gov](http://www.irs.gov), or you can call the IRS toll-free at 1-800-829-1040.

### If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to [www.irs.gov](http://www.irs.gov) and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

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The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

### If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to [www.irs.gov/e-pay](http://www.irs.gov/e-pay).

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to [www.irs.gov](http://www.irs.gov). You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

### If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

### Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. **If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.**

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### Instructions for Electronic Return Originators

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**Line 2** - PIN Presence Indicator - Check box 2 if the taxpayer entered a PIN or authorized the ERO to enter or generate the PIN for the taxpayer, and the Acknowledgement File PIN Presence Indicator is a "Practitioner PIN," "Self-Select PIN" or "Online Filer PIN." Form 8879, IRS *e-file* Signature Authorization, is required if the ERO enters or generates the PIN or if the Practitioner PIN method is used. **Use Form 8453, U.S. Individual Income Tax Transmittal for an IRS *e-file* Return, to send required paper forms or supporting documentation listed next to the form check boxes (do not send Forms W-2, W-2G, or 1099R).**

**Line 3** - Exception Processing - Check box 3 if the Acknowledgement File Acceptance Code equals "Exception." The acceptance code indicates that this return has been previously rejected and this subsequent submission still has invalid data.

**Line 4** - Payment Acknowledgement Literal - Check box 4 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field equals "Payment Request Received."

**Line 5** - Payment Acknowledgement Literal - Check box 5 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field does not equal "Payment Request Received." If box 5 is checked, inform the taxpayer that he/she must pay by check, money order, debit card, or credit card.

**Note:** EROs can use the Acknowledgement File information, translated by the transmitter, to complete Form 9325.

(This information is e-filed with the return. Do not include it if paper-filing)

Name(s) shown on return <b>SHASHI &amp; PARVATI SINGH</b>	Taxpayer's SSN <b>658-44-0842</b>
	Spouse's SSN <b>823-88-5932</b>
Routing Transit Number <b>103000017</b>	
Bank Account Number <b>305005218259</b>	
Type of Account <b>1 Checking</b>	
Amount of Tax Payment <b>2,644</b>	
Requested Payment Date <b>04-15-2024</b>	
Taxpayer's Daytime Phone Number <b>901-656-9836</b>	
Type of Form being filed <b>1040</b>	
Taxpayer's Signature	Date
Spouse's Signature	Date

**DRAFT COPY**

**IRS e-file Signature Authorization**

OMB No. 1545-0074

**2023**

- ▶ ERO must obtain and retain completed Form 8879.
- ▶ Go to [www.irs.gov/Form8879](http://www.irs.gov/Form8879) for the latest information.

Submission Identification Number (SID) ▶

Taxpayer's name <b>SHASHI SINGH</b>	Social security number <b>658-44-0842</b>
Spouse's name <b>PARVATI SINGH</b>	Spouse's social security number <b>823-88-5932</b>

**Part I Tax Return Information - Tax Year Ending December 31, 2023** (Enter year you are authorizing.)

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	161,120
2 Total tax	2	18,673
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	16,067
4 Amount you want refunded to you	4	
5 Amount you owe	5	2,644

**Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

**Taxpayer's PIN: check one box only**

- I authorize ADVANTAGE ONE PARTNERS INC to enter or generate my PIN 66988 as my signature on the income tax return (original or amended) I am now authorizing. ERO firm name Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**Spouse's PIN: check one box only**

- I authorize ADVANTAGE ONE PARTNERS INC to enter or generate my PIN 65325 as my signature on the income tax return (original or amended) I am now authorizing. ERO firm name Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**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. 540893-36506  
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ \_\_\_\_\_ Date ▶ 03-11-2024

**ERO Must Retain This Form - See Instructions**  
**Don't Submit This Form to the IRS Unless Requested To Do So**

**Summary of Estimates**

**2024**

Name(s) as shown on return

Tax ID Number

**SHASHI & PARVATI SINGH**

**658-44-0842**

**Federal**

**Form: 1040-ES**

**Payment Schedule**

Due Date	04-15-2024	06-17-2024	09-16-2024	01-15-2025	Total
Total Installment Amount	1,120	1,120	1,120	1,120	4,480
Overpayment Applied	0	0	0	0	0
Net Installment Due	1,120	1,120	1,120	1,120	4,480

**Taxpayer Records**

Amount Actually Paid				
Date Paid				
Check #/Confirmation				

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# Estimated Tax Worksheet for Next Year

(This page is not filed with the return. It is for your records only.)

**2023**

Name(s) as shown on return

Tax ID Number

**SHASHI & PARVATI SINGH**

**658-44-0842**

1.	Wages . . . . .	1.	_____
2.	Interest and Dividend income . . . . .	2.	_____
3.	Capital gain income . . . . .	3.	_____
4.	Taxable IRA/Pension income . . . . .	4.	_____
5.	Taxable Social Security income . . . . .	5.	_____
6.	Business income . . . . .	6.	_____
7.	Other income . . . . .	7.	_____
8.	Total income (add lines 1 thru 7) . . . . .	8.	_____
9.	Adjustments to income . . . . .	9.	_____
10.	Adjusted gross income (subtract line 9 from line 8) . . . . .	10.	_____
11a.	Itemized deductions . . . . .	11a.	_____
11b.	Standard deduction . . . . .	11b.	_____
12.	Taxable income (subtract the larger of line 11a or 11b from line 10) . . . . .	12.	_____
13.	Estimated Section 199A deduction for qualified trade or business income . . . . .	13.	_____
14.	Projected taxable income (subtract line 13 from line 12) . . . . .	14.	_____
15.	Projected Tax . . . . .	15.	_____
16.	Alternative Minimum Tax . . . . .	16.	_____
17.	Total tax . . . . .	17.	_____
18a.	Child Tax Credit and Other Dependent Credit . . . . .	18a.	_____
18b.	Other projected Credits . . . . .	18b.	_____
18c.	Total projected credits . . . . .	18c.	_____
19.	Subtract line 18d from line 17 . . . . .	19.	_____
20.	Projected SE Tax - Taxpayer . . . . .	20.	_____
21.	Projected SE Tax - Spouse . . . . .	21.	_____
22.	Other taxes . . . . .	22.	_____
23a.	Add lines 19 through 22 . . . . .	23a.	_____
b.	Earned income credit, additional child tax credit, fuel tax credit, net premium tax credit, refundable American opportunity credit, and refundable credit from Form 8885 . . . . .	23b.	_____
c.	<b>Total 2024 estimated tax.</b> Subtract line 23b from line 23a. If zero or less enter -0- . . . . .	23c.	_____
24a.	Multiply line 23c by 90% (66 2/3% for farmers and fishermen) . . . . .	24a.	_____
b.	Required annual payment based on prior year's tax (see instructions) <b>110%</b> . . . . .	24b.	<b>20,540</b>
c.	<b>Required annual payment to avoid a penalty.</b> Enter the <b>smaller</b> of line 24a or 24b . . . . .	24c.	<b>20,540</b>
25.	Projected Withholding . . . . .	25.	<b>16,067</b>
26.	Projected Net Tax (subtract line 25 from line 24c) . . . . .	26.	<b>4,473</b>

Estimates will be computed on \$4,473. This is line 26.

Use screen ETA to provide accurate estimates of next year's income, deductions, and credits. If screen ETA is used, lines 1-24a of this worksheet will be autofilled.

The Estimated Tax Worksheet for Next Year (WK\_ES) does not take every tax scenario into account. The worksheet recomputes calculations for taxable Social Security, Schedule A, and tax including capital gains tax rates, as well as Child Tax Credit (CTC), Additional Child Tax Credit (ACTC), and self-employment (SE) tax. If other calculations are needed for an accurate estimated tax determination, (Ex. Form 8959, Form 8960), use the Tax Planner.







**Federal Income Tax Withheld**

(This page is not filed with the return. It is for your records only.)

**2023 PG01**

Name(s) as shown on return

**SHASHI & PARVATI SINGH**

Tax ID Number

**658-44-0842**

Description

Amount

**W2 - LTIMINDTREE LIMITED**

**16,067**

**W-2 Subtotal**

**16,067**

**Total Withholdings**

**16,067**

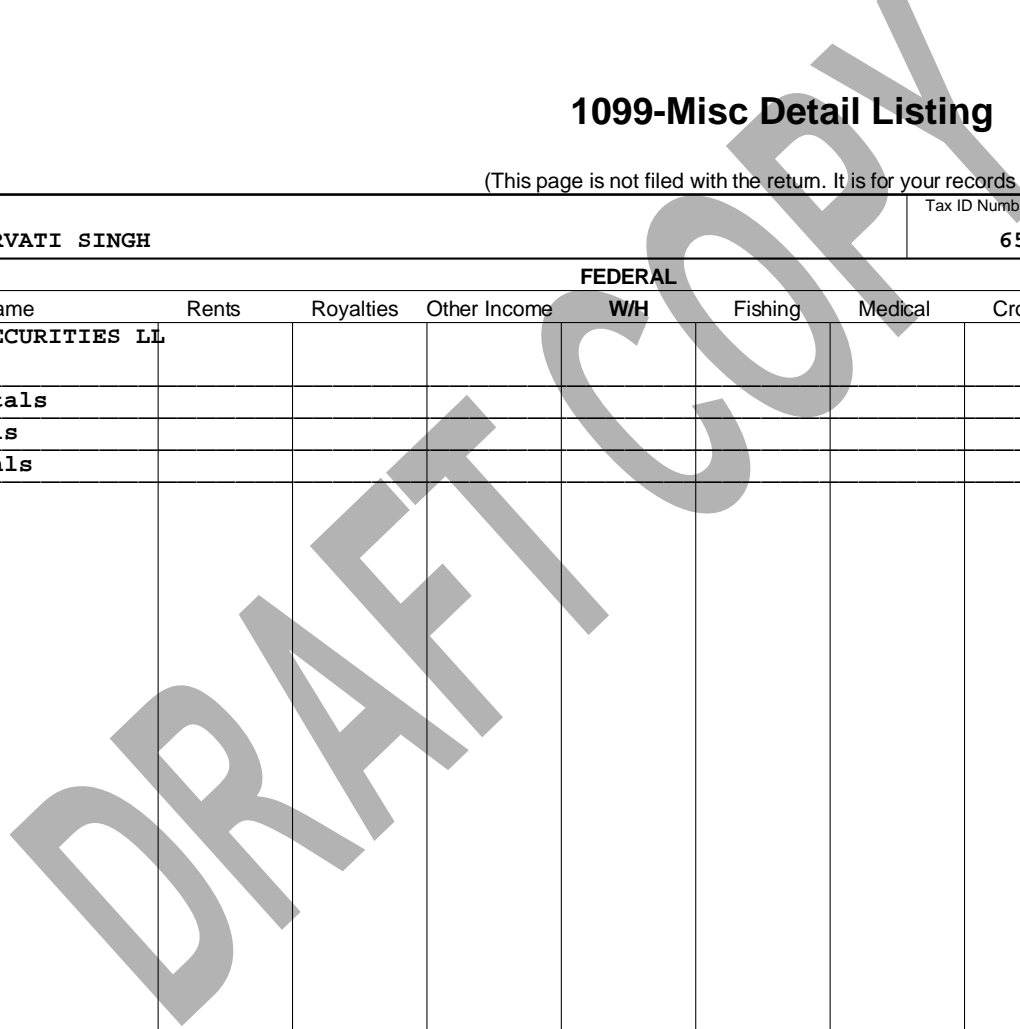
**DRAFT COPY**

# 1099-Misc Detail Listing

(This page is not filed with the return. It is for your records only.)

Name(s) as shown on return <b>SHASHI &amp; PARVATI SINGH</b>	Tax ID Number <b>658-44-0842</b>
-----------------------------------------------------------------	-------------------------------------

T/S	Payer Name	Rents	Royalties	Other Income	FEDERAL					STATE			
					W/H	Fishing	Medical	Crop Ins	Attorney	FishPurch	W/H	ST Income	
T	ROBINHOOD SECURITIES LI.												
T	<b>Taxpayer Totals</b>												
S	<b>Spouse Totals</b>												
	<b>Overall Totals</b>												



# W-2 Detail Listing

(This page is not filed with the return. It is for your records only.)

**2023**

Name(s) as shown on return

Tax ID Number

SHASHI & PARVATI SINGH

658-44-0842

T/S	Employer Name	FEDERAL			STATE	
		Gross	W/H	State Code	Gross	W/H
T	LTIMINDTREE LIMITED	164,102	16,067			
	<b>Totals</b>	<b>164,102</b>	<b>16,067</b>			

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## Computation of Regular Tax

(This page is not filed with the return. It is for your records only.)

**2023**

Name(s) as shown on return

Tax ID Number

**SHASHI & PARVATI SINGH**

**658-44-0842**

### STATEMENT FOR LINE 16 OF FORM 1040

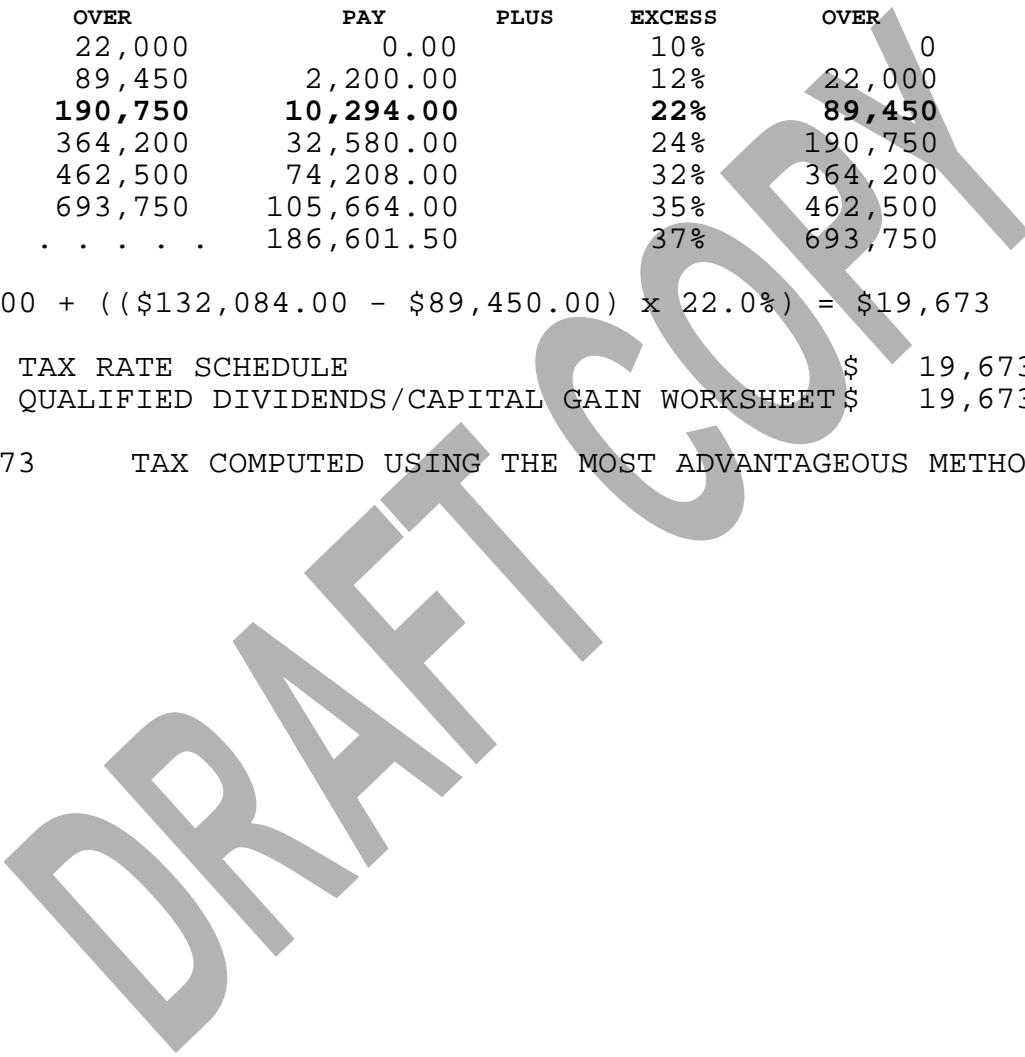
**TAX RATE SCHEDULE FOR MARRIED FILING JOINT FILING STATUS  
IF TAXABLE INCOME IS**

OVER	BUT NOT OVER	PAY	PLUS	% ON EXCESS	OF THE AMOUNT OVER
0	22,000	0.00		10%	0
22,000	89,450	2,200.00		12%	22,000
<b>89,450</b>	<b>190,750</b>	<b>10,294.00</b>		<b>22%</b>	<b>89,450</b>
190,750	364,200	32,580.00		24%	190,750
364,200	462,500	74,208.00		32%	364,200
462,500	693,750	105,664.00		35%	462,500
693,750	. . . . .	186,601.50		37%	693,750

$\$10,294.00 + ((\$132,084.00 - \$89,450.00) \times 22.0\%) = \$19,673$

TAX FROM TAX RATE SCHEDULE \$ 19,673  
 TAX FROM QUALIFIED DIVIDENDS/CAPITAL GAIN WORKSHEET \$ 19,673

**\$ 19,673 TAX COMPUTED USING THE MOST ADVANTAGEOUS METHOD ALLOWED**



# Qualified Dividends and Capital Gain Tax Worksheet - Line 16 (Form 1040)

(This page is not filed with the return. It is for your records only.)

**2023**

Name(s) as shown on return

Tax ID Number

**SHASHI & PARVATI SINGH**

**658-44-0842**

**Before you begin:**

- See the earlier instructions for line 16 to see if you can use this worksheet to figure your tax.
- Before completing this worksheet, complete Form 1040 or 1040-SR through line 15.
- If you don't have to file Schedule D and you received capital gain distributions, be sure you checked the box on Form 1040 or 1040-SR, line 7.

1.	Enter the amount from Form 1040 or 1040-SR, line 15. However, if you are filing Form 2555 (relating to foreign earned income), enter the amount from line 3 of the Foreign Earned Income Tax Worksheet . . . . .	1.	132,084
2.	Enter the amount from Form 1040 or 1040-SR, line 3a* . . . . .	2.	7
3.	Are you filing Schedule D?*		
	<input checked="" type="checkbox"/> <b>Yes.</b> Enter the <b>smaller</b> of line 15 or 16 of Schedule D. If either line 15 or 16 is blank or a loss, enter -0- . . . . .	3.	
	<input type="checkbox"/> <b>No.</b> Enter the amount from Form 1040 or 1040-SR, line 7. . . . .		
4.	Add lines 2 and 3 . . . . .	4.	7
5.	Subtract line 4 from line 1. If zero or less, enter -0- . . . . .	5.	132,077
6.	Enter: \$44,625 if single or married filing separately, \$89,250 if married filing jointly or qualifying surviving spouse, \$59,750 if head of household. . . . .	6.	89,250
7.	Enter the smaller of line 1 or line 6 . . . . .	7.	89,250
8.	Enter the smaller of line 5 or line 7 . . . . .	8.	89,250
9.	Subtract line 8 from line 7. This amount is taxed at 0% . . . . .	9.	
10.	Enter the smaller of line 1 or line 4 . . . . .	10.	7
11.	Enter the amount from line 9 . . . . .	11.	
12.	Subtract line 11 from line 10 . . . . .	12.	7
13.	Enter: \$492,300 if single, \$276,900 if married filing separately, \$553,850 if married filing jointly or qualifying surviving spouse, \$523,050 if head of household. . . . .	13.	553,850
14.	Enter the smaller of line 1 or line 13 . . . . .	14.	132,084
15.	Add lines 5 and 9 . . . . .	15.	132,077
16.	Subtract line 15 from line 14. If zero or less, enter -0- . . . . .	16.	7
17.	Enter the smaller of line 12 or line 16 . . . . .	17.	7
18.	Multiply line 17 by 15% (0.15) . . . . .	18.	1
19.	Add lines 9 and 17 . . . . .	19.	7
20.	Subtract line 19 from line 10 . . . . .	20.	
21.	Multiply line 20 by 20% (0.20) . . . . .	21.	
22.	Figure the tax on the amount on line 5. If the amount on line 5 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 5 is \$100,000 or more, use the Tax Computation Worksheet . . . . .	22.	19,672
23.	Add lines 18, 21, and 22 . . . . .	23.	19,673
24.	Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet . . . . .	24.	19,673
25.	<b>Tax on all taxable income.</b> Enter the <b>smaller</b> of line 23 or 24. Also include this amount on the entry space on Form 1040 or 1040-SR, line 16. If you are filing Form 2555, don't enter this amount on the entry space on Form 1040 or 1040-SR, line 16. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet . . . . .	25.	19,673

\* If you are filing Form 2555, see the footnote in the Foreign Earned Income Tax Worksheet before completing this line.

# State and Local General Sales Tax Deduction Worksheet - Line 5a

(This page is not filed with the return. It is for your records only.)

**2023**

Name(s) as shown on return

Tax ID Number

**SHASHI & PARVATI SINGH**

**658-44-0842**

**Before you begin:** See the instructions for line 1 of the worksheet if you:

- Lived in more than one state during 2023, or
- Had any **nontaxable** income in 2023.

1. Enter your **state** general sales taxes from the 2023 Optional State Sales Tax Table . . . . . **1.** 1,726

**Next.** If, for all of 2023, you lived only in Connecticut, the District of Columbia, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Jersey, or Rhode Island, skip lines 2 through 5, enter -0- on line 6, and go to line 7. Otherwise, go to line 2.

2. Did you live in Alabama, Alaska, Arizona, Arkansas, Colorado, Georgia, Illinois, Kansas, Louisiana, Mississippi, Missouri, New York, North Carolina, South Carolina, Tennessee, Utah, or Virginia in 2023?

- No.** Enter -0-.
- Yes.** Enter your base **local** general sales taxes from the 2023 Optional Local Sales Tax Tables. . . . . **2.** \_\_\_\_\_

3. Did your locality impose a **local** general sales tax in 2023? Residents of California and Nevada, see the instructions for line 3 of the worksheet.

- No.** Skip lines 3 through 5, enter -0- on line 6, and go to line 7.
- Yes.** Enter your **local** general sales tax rate, but omit the percentage sign. For example, if your local general sales tax rate was 2.5%, enter 2.5. If your local general sales tax rate changed or you lived in more than one locality in the same state during 2023, see the instructions for line 3 of the worksheet . . . . . **3.** \_\_\_\_\_

4. Did you enter -0- on line 2?

- No.** Skip lines 4 and 5 and go to line 6.
- Yes.** Enter your **state** general sales tax rate (shown in the table heading for your state), but omit the percentage sign. For example, if your state general sales tax rate is 6%, enter 6.0 . . . . . **4.** \_\_\_\_\_

5. Divide line 3 by line 4. Enter the result as a decimal (rounded to at least three places) . . . **5.** \_\_\_\_\_

6. Did you enter -0- on line 2?

- No.** Multiply line 2 by line 3.
- Yes.** Multiply line 1 by line 5. If you lived in more than one locality in the same state during 2023, see the instructions for line 6 of the worksheet. . . . . **6.** \_\_\_\_\_

7. Enter your state and local general sales taxes paid on specified items, if any. See the instructions for line 7 of the worksheet . . . . . **7.** \_\_\_\_\_

**8. Deduction for general sales taxes.** Add lines 1, 6, and 7. Enter the result here and the total from all your state and local general sales tax deduction worksheets, if you completed more than one, on Schedule A, line 5a. Be sure to check the **box** on that line . . . . . **8.** 1,726

**Optional Sales Tax Table Computation**

State:	TX			
Income:	161,120			
Family Size:*	4			
Amount from table:	1,726			
Days:	365			
Deduction:	1,726			

\* "Over 5" is the maximum number in family size for the optional sales tax tables in Schedule A Instructions. Returns with a family size of 6 or more will display a "6" on this line.

**Worksheet for Form 2210, Part III, Section B -  
Figure the Penalty**

(This page is not filed with the return. It is for your records only.)

**2023**

Name(s) as shown on return

Tax ID Number

**SHASHI & PARVATI SINGH**

**658-44-0842**

Complete Rate Period 1 of each column before going to the next column; then go to Rate Periods 2, 3, and 4 in the same manner. If multiple estimated tax payments are applied to the underpayment amount in a column of line 1a, you'll need to make more than one computation for that column.

		Payment Due Dates			
		(a) 04/15/23	(b) 06/15/23	(c) 09/15/23	(d) 01/15/24
<b>1a</b>	Enter your underpayment from Part III, Section A, line 17 . . . . .	<b>1a</b> 185	370	555	740
<b>1b</b>	Date and amount of each payment applied to the underpayment in the same column. Don't enter more than the underpayment amount on line 1a for each column (see instructions). <b>Note.</b> Your payments are applied in the order made first to any underpayment balance in an earlier column until that underpayment is fully paid.	<b>1b</b> 06-15-2023 185	09-15-2023 370	01-15-2024 555	04-15-2024 740
<b>Rate Period 1: April 16, 2023 - June 30, 2023</b>					
<b>2</b>	Computation starting dates for this period . . . . .	<b>2</b> 04/15/23	06/15/23		
<b>3</b>	Number of days from the date on line 2 to the date the amount on line 1a was paid or 6/30/23, whichever is earlier . . . . .	<b>3</b> Days: 61	15		
<b>4</b>	Underpayment on line 1a x $\frac{\text{Number of days on line 3}}{365}$ x 0.07	<b>4</b> \$ 2	\$ 1		
<b>Rate Period 2: July 1, 2023 - September 30, 2023</b>					
<b>5</b>	Computation starting dates for this period . . . . .	<b>5</b> 06/30/23	06/30/23	09/15/23	
<b>6</b>	Number of days from the date on line 5 to the date the amount on line 1a was paid or 9/30/23, whichever is earlier . . . . .	<b>6</b> Days: 77	15		
<b>7</b>	Underpayment on line 1a x $\frac{\text{Number of days on line 6}}{365}$ x 0.07	<b>7</b> \$ 5	\$ 2		
<b>Rate Period 3: October 1, 2023 - December 31, 2023</b>					
<b>8</b>	Computation starting dates for this period . . . . .	<b>8</b> 09/30/23	09/30/23	09/30/23	
<b>9</b>	Number of days from the date on line 8 to the date the amount on line 1a was paid or 12/31/23, whichever is earlier . . . . .	<b>9</b> Days: 92			
<b>10</b>	Underpayment on line 1a x $\frac{\text{Number of days on line 9}}{365}$ x 0.08	<b>10</b> \$ 11			
<b>Rate Period 4: January 1, 2024 - April 15, 2024</b>					
<b>11</b>	Computation starting dates for this period . . . . .	<b>11</b> 12/31/23	12/31/23	12/31/23	01/15/24
<b>12</b>	Number of days from the date on line 11 to the date the amount on line 1a was paid or 4/15/24, whichever is earlier . . . . .	<b>12</b> Days: 15			91
<b>13</b>	Underpayment on line 1a x $\frac{\text{Number of days on line 12}}{366}$ x 0.08	<b>13</b> \$ 2			\$ 15
<b>14</b>	<b>Penalty.</b> Add all amounts on lines 4, 7, 10, and 13 in all columns. Enter the total here and on line 19 of Part III, Section B . . . . .	<b>14</b> \$ 38			

# Carryover Worksheet

## List of items that will carryover to the 2024 tax return

(This page is not filed with the return. It is for your records only.)

**2023**

Name(s) as shown on return

Tax ID Number

**SHASHI & PARVATI SINGH**

**658-44-0842**

### Itemized Deductions

Carryover Amount

Contributions subject to 100% of AGI limitations			
Contributions subject to 60% of AGI limitations			
Contributions subject to 30% of AGI limitations (50% capital gains appreciated property)			
Contributions subject to 30% of AGI limitations			
Contributions subject to 20% of AGI limitations (30% capital gains appreciated property)			
Taxable state and local refunds to Schedule 1 (Form 1040) line 1			
State/local taxes paid in 2024 to flow to the Schedule A			
State donations and contributions carryover			
State overpayment applied to next year			

### Expenses

Office in home operating expenses			
Office in home excess casualty losses and depreciation			
Disallowed investment interest expense	AMT		Reg. Tax
Section 179 expense			
Operating expenses, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use			
Excess depreciation, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use			

### Losses

Short-term capital loss	AMT		Reg. Tax
Long-term capital loss	AMT	2,482	Reg. Tax <span style="float: right;">2,482</span>
Net operating loss	AMT		Reg. Tax
Excess business loss from Form 461 (becomes part of NOL next year)	AMT		Reg. Tax
Qualified REIT and PTP loss carryover			
QBI loss carryover			
Nonrecaptured net section 1231 losses from WK_1231C	AMT		Reg. Tax

### Credits

Mortgage interest credit			
Credit for prior year minimum tax			
Foreign Tax credit	AMT		Reg. Tax
District of Columbia first time home owner's credit			
Residential clean energy credit			

### Other

Preparer Fee			
Overpayment applied to next year's estimates			
Estimated Tax Payment 1	1,120	Estimated Tax Payment 2	1,120
Estimated Tax Payment 3	1,120	Estimated Tax Payment 4	1,120
Federal tax liability for 2210 calculation			18,673
State tax liability for state 2210 calculation			
IRA basis	Taxpayer		Spouse
Disaster distributions taxable in 2024	Taxpayer		Spouse
Disaster distributions taxable in 2025	Taxpayer		Spouse
Excess repayments from 8915-F	Taxpayer		Spouse

### Passive Activity

### At Risk Limitations



## Capital Loss Carryover Worksheet to 2024

**Schedule D**

(This page is not filed with the return. It is for your records only.)

**2023**

Name(s) as shown on return

Tax ID Number

**SHASHI & PARVATI SINGH**

**658-44-0842**

<p>1. Enter the amount from your 2023 Form 1040 or 1040-SR, line 15, or your 2023 Form 1040-NR, line 15. If the amount would have been a loss if you could enter a negative number on that line, enclose the amount in parentheses . . . . .</p> <p>2. Enter the loss from your 2023 Schedule D, line 21, as a positive amount . . . . .</p> <p>3. Combine lines 1 and 2. If zero or less, enter -0- . . . . .</p> <p>4. Enter the <b>smaller</b> of line 2 or line 3 . . . . .</p> <p><b>If line 7 of your 2023 Schedule D is a loss, go to line 5; otherwise, enter -0- on line 5 and go to line 9.</b></p> <p>5. Enter the loss from your 2023 Schedule D, line 7, as a positive amount . . . . .</p> <p>6. Enter any gain from your 2023 Schedule D, line 15. If a loss, enter -0- . . . . .</p> <p>7. Add lines 4 and 6 . . . . .</p> <p>8. <b>Short-term capital loss carryover to 2024.</b> Subtract line 7 from line 5. If zero or less, enter -0-. If more than zero, also enter this amount on Schedule D, line 6 . . . . .</p> <p><b>If line 15 of your 2023 Schedule D is a loss, go to line 9; otherwise, skip lines 9 through 13.</b></p> <p>9. Enter the loss from your 2023 Schedule D, line 15, as a positive amount . . . . .</p> <p>10. Enter any gain from your 2023 Schedule D, line 7. If a loss, enter -0- . . . . .</p> <p>11. Subtract line 5 from line 4. If zero or less, enter -0- . . . . .</p> <p>12. Add lines 10 and 11 . . . . .</p> <p>13. <b>Long-term capital loss carryover for 2024.</b> Subtract line 12 from line 9. . . . .</p>	<p>1. <u>132,084</u></p> <p>2. <u>3,000</u></p> <p>3. <u>135,084</u></p> <p>4. <u>3,000</u></p> <p>5. <u>949</u></p> <p>6. <u>0</u></p> <p>7. <u>3,000</u></p> <p>8. <u>0</u></p> <p>9. <u>4,533</u></p> <p>10. <u>0</u></p> <p>11. <u>2,051</u></p> <p>12. <u>2,051</u></p> <p>13. <u>2,482</u></p>
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**AMT Capital Loss Carryover to 2024 Worksheet**

(This page is not filed with the return. It is for your records only.)

**2023**

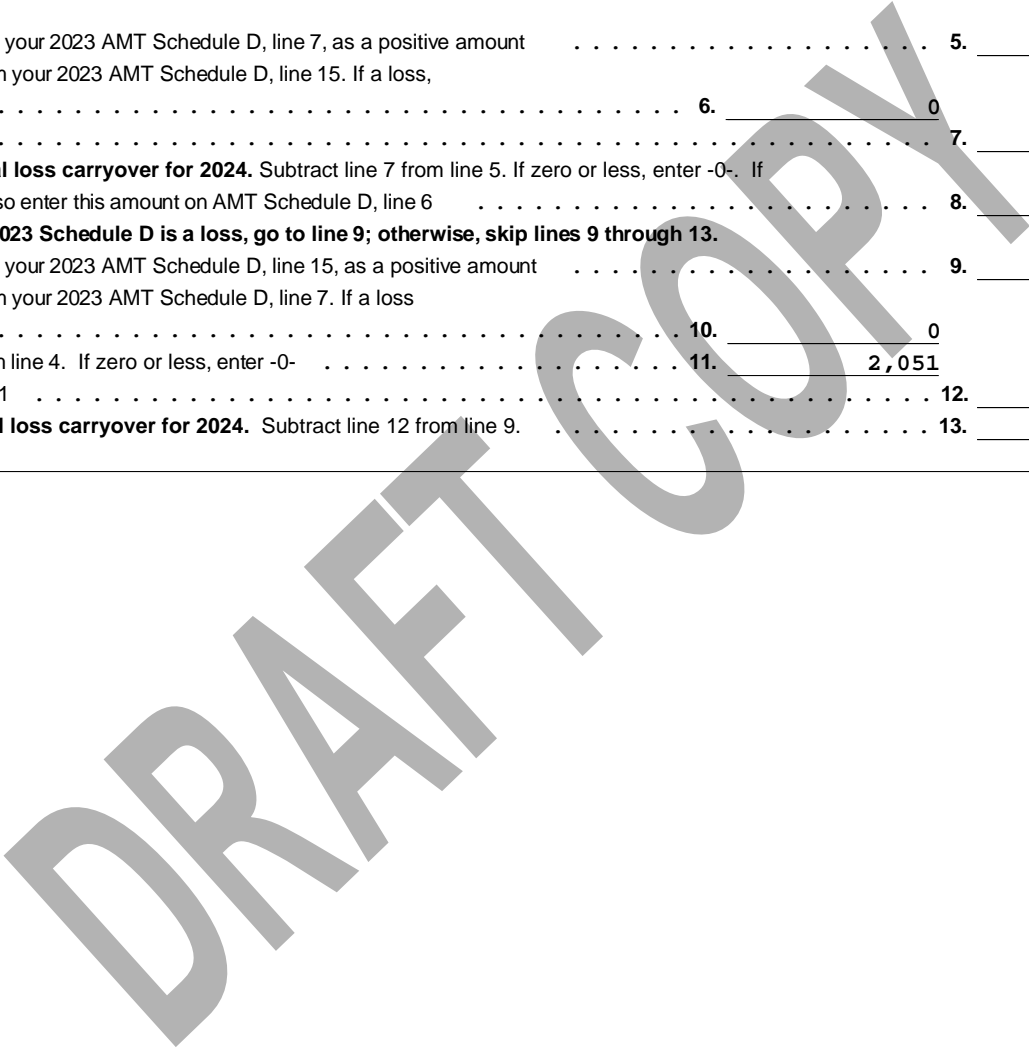
Name(s) as shown on return

Tax ID Number

**SHASHI & PARVATI SINGH**

**658-44-0842**

1. Enter the amount from your 2023 Form 1040 or 1040-SR, line 15, or your 2023 Form 1040-NR, line 15. If the amount would have been a loss if you could enter a negative number on that line, enclose the amount in parentheses . . . . .	1.	<u>141,153</u>
2. Enter the loss from your 2023 AMT Schedule D, line 21, as a positive amount . . . . .	2.	<u>3,000</u>
3. Combine lines 1 and 2. If zero or less, enter -0- . . . . .	3.	<u>144,153</u>
4. Enter the <b>smaller</b> of line 2 or line 3 . . . . .	4.	<u>3,000</u>
<b>If line 7 of your 2023 Schedule D is a loss, go to line 5; otherwise, enter -0- on line 5 and go to line 9.</b>		
5. Enter the loss from your 2023 AMT Schedule D, line 7, as a positive amount . . . . .	5.	<u>949</u>
6. Enter any gain from your 2023 AMT Schedule D, line 15. If a loss, enter -0- . . . . .	6.	<u>0</u>
7. Add lines 4 and 6 . . . . .	7.	<u>3,000</u>
8. <b>Short-term capital loss carryover for 2024.</b> Subtract line 7 from line 5. If zero or less, enter -0-. If more than zero, also enter this amount on AMT Schedule D, line 6 . . . . .	8.	<u>0</u>
<b>If line 15 of your 2023 Schedule D is a loss, go to line 9; otherwise, skip lines 9 through 13.</b>		
9. Enter the loss from your 2023 AMT Schedule D, line 15, as a positive amount . . . . .	9.	<u>4,533</u>
10. Enter any gain from your 2023 AMT Schedule D, line 7. If a loss, enter -0- . . . . .	10.	<u>0</u>
11. Subtract line 5 from line 4. If zero or less, enter -0- . . . . .	11.	<u>2,051</u>
12. Add lines 10 and 11 . . . . .	12.	<u>2,051</u>
13. <b>Long-term capital loss carryover for 2024.</b> Subtract line 12 from line 9. . . . .	13.	<u>2,482</u>



**TAX RETURN COMPARISON  
2021 / 2022 / 2023**

**2023**

(This page is not filed with the return. It is for your records only.)

	2021	2022	2023	Difference 2022-2023
Name(s) as shown on return <b>SHASHI &amp; PARVATI SINGH</b>				Identifying number <b>658-44-0842</b>
Filing Status . . . . .			Married Joint	
Number of Dependents . . . . .			2	2
<b>Income</b>				
Wages, salaries, tips, etc. . . . .			164,102	164,102
Taxable interest and dividends . . . . .			17	17
Taxable state and local refunds . . . . .				
Alimony . . . . .				
Business income (loss) . . . . .				
Gains (losses) . . . . .			(3,000)	(3,000)
Pensions and IRA distributions . . . . .				
Rent and royalty income (loss) . . . . .				
Part, S-corps, trusts income (loss) . . . . .				
Farm income (loss) . . . . .				
Unemployment compensation . . . . .				
Total SS benefits received . . . . .				
Taxable SS benefits . . . . .				
Other income (loss) . . . . .			1	1
<b>Total Income</b> . . . . .			161,120	161,120
<b>Adjusted Gross Income</b>				
Half of self-employment tax . . . . .				
IRA deduction . . . . .				
Other adjustments . . . . .				
<b>Total Adjusted Gross Income</b> . . . . .			161,120	161,120
<b>Deductions</b>				
Medical deductions . . . . .				
State and local taxes . . . . .			9,069	9,069
Interest . . . . .			19,967	19,967
Contributions . . . . .				
Other deductions . . . . .				
Total itemized deductions . . . . .			29,036	29,036
Standard deduction . . . . .			27,700	27,700
<b>Total deductions claimed</b> . . . . .			29,036	29,036
<b>Qualified Business Income Deduction</b> . . . . .				
<b>Tax and Credits</b>				
<b>Taxable Income</b> . . . . .			132,084	132,084
Tax . . . . .			19,673	19,673
Credits . . . . .			1,000	1,000
Self-employment tax . . . . .				
Other taxes . . . . .				
<b>Total Tax</b> . . . . .			18,673	18,673
<b>Payments</b>				
Withholdings . . . . .			16,067	16,067
Estimated tax payments . . . . .				
Earned income credit . . . . .				
Other payments and credits . . . . .				
Estimated tax penalty . . . . .			38	38
<b>Overpayment</b> . . . . .				
Overpayment applied . . . . .				
<b>Refund</b> . . . . .				
<b>Balance Due</b> . . . . .			2,644	2,644
Marginal tax rate . . . . .			22.00	22.00
Effective tax rate . . . . .			14.89	14.89

Account Transaction Summary

2023

Name(s) as shown on return

Tax ID Number

SHASHI & PARVATI SINGH

XXX-XX-0842

Account #1

<b>Financial Institution</b>	BANK OF AMERICA
<b>Routing Transit Number</b>	103000017
<b>Account Number</b>	305005218259
<b>Account Type</b>	checking

Federal Main Form		
Federal Debit	(2,644)	<b>Date of Debit</b> 04-15-2024

<b>Net Debit</b>	<u>(2,644)</u>	
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PLEASE VERIFY BANK INFORMATION

1. Bank Name
2. Bank Routing Transit Number
3. Bank Account Number
4. Bank Account Type

This information is used to deposit your refund or to pay any amount due. If you have provided incorrect information, or you have closed the account, you are responsible.

I have reviewed the above information and certify that this information is correct and authorize ADVANTAGE ONE PARTNERS INC to use this account.

Your Signature

Date

Spouse's Signature (If Married Filing Jointly)

Date

1040

Individual Diagnostic Summary

2023

Name(s) SHASHI & PARVATI SINGH

Taxpayer Tax ID Number 658-44-0842

Spouse Tax Id Number 823-88-5932

Mailing Address: 3309 ARBOR CREEK LN FLOWER MOUND, TX 75022

Taxpayer Spouse Date of Birth: 07-07-1977 04-18-1980 Age on 12/31/2023: 46 43 Daytime Phone: 901-656-9836 901-446-8207

Resident State: TX

Evening Phone: Cell Phone: Taxpayer email: SHASHIKS@GMAIL.COM Spouse email: GUDIA.PARVATI@GMAIL.COM

Dependent Information If more than 5 dependents, see last page of summary.

Table with 7 columns: Name, SSN, Relationship, Date of Birth, Age, Status. Rows include HARSH SINGH and YASH SINGH.

Preparer: SUMIT PANJABI

Invoice # and Amount:

Date: 03-11-2024

Return Information Form Type: 1040

Table with 3 columns: Item on Return, 2023 Federal, 2022 Federal (if available). Rows include Filing Status, Exemptions, Total Income, AGI, Deductions, Taxable Income, Tax (before credits), Tax Rate Percentage, SE Tax, Tax (after credits), EIC, Additional CTC, Overpayment, Refund, Refund Applied to ES, Balance Due.

Form of Refund/Payment: The client has chosen to pay by direct debit.

State/City Information If more than 8 states, see last page of summary.

T/S/J State/City AGI Taxable Income Tax Refund/ (Balance Due)



Notes about the return

2023 PAGE 1

Name(s) as shown on return

Tax ID Number

SHASHI & PARVATI SINGH

658-44-0842

058 NO PRIOR-YEAR TAX FOR FORM 2210: Because no prior-year tax is entered for Form 2210 (Underpayment of Estimated Tax) computations, the program assumes that last year's tax was higher than this year's tax OR that the prior-year tax was entered as zero ("0") and no Form 2210 is necessary.

293 ESTIMATED PAYMENT OPTION: If the taxpayer chooses to pay the estimated tax payments via credit card, you can use the Drake e-Payment Center website to make the payment: [www.1040paytax.com](http://www.1040paytax.com). The Drake e-Payment Center also allows you to schedule e-mail reminders to help the taxpayer make timely estimated tax payments.

Note: You can also provide the taxpayer this website address so he or she can make the payment when convenient.

483 PAYMENT VOUCHERS GENERATED: The program has automatically produced federal estimated payment vouchers for this return because the taxpayer's taxes due are more than \$1,000 greater than the taxpayer's withholdings. The amount of the payments can be adjusted on the ES screen.

To suppress the automatic generation of ES payment vouchers, from the Home window, go to Setup > Options > Forms & Schedule Options tab.

534 ITIN RENEWAL POSSIBLY REQUIRED: This return contains an ITIN that may have expired.

Refer to the "What's New" section of Form W-7 instructions or log onto the IRS website for information regarding ITIN renewals: [www.irs.gov/tax-professionals](http://www.irs.gov/tax-professionals)

Use Form W-7, available on the "Foreign" tab of the Data Entry Menu, to renew the ITIN, if it has not already been renewed.

2024 Form 1040-ES Estimated Tax Voucher and Filing Instructions  
SHASHI & PARVATI SINGH

**Due date:**

04-15-2024

**Balance due:**

\$1,120

**Transaction method:**

To pay by check or money order, write "2024 Form 1040-ES," your name, address, SSN or ITIN, and daytime phone number on the payment, make it payable to "United States Treasury," and mail to the address below. To pay using your bank account (at no extra cost to you), go to IRS.gov/Payments. To pay by credit or debit card (for a fee), go to 1040paytax.com.

**Other information:**

Detach the voucher below along the line and mail the voucher with your payment. Do not staple or attach the payment to the voucher.

**Mail-to address:**

Internal Revenue Service  
P.O. Box 1300  
Charlotte, NC 28201-1300

**Taxpayer records:**

Amount paid \_\_\_\_\_  
Check number \_\_\_\_\_  
Date mailed \_\_\_\_\_

(Cut here)

Form 1040-ES (OCR)

**2024**

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0074

**Estimated Tax**

**Payment  
Voucher 1**

Calendar year -  
Due April 15, 2024

- ▶ Make your check or money order payable to "United States Treasury."
- ▶ Enter your SSN and "2024 Form 1040-ES" on your payment.
- ▶ If your name, address, or SSN is incorrect, see instructions.

**Amount of estimated tax you are  
paying by check or money order.**

**1,120**

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

**1024**

SHASHI & PARVATI SINGH  
3309 ARBOR CREEK LN  
FLOWER MOUND, TX 75022

Internal Revenue Service  
P.O. Box 1300  
Charlotte, NC 28201-1300

658440842 W0 SING 30 0 202412 430



2024 Form 1040-ES Estimated Tax Voucher and Filing Instructions  
SHASHI & PARVATI SINGH

**Due date:**

06-17-2024

**Balance due:**

\$1,120

**Transaction method:**

To pay by check or money order, write "2024 Form 1040-ES," your name, address, SSN or ITIN, and daytime phone number on the payment, make it payable to "United States Treasury," and mail to the address below. To pay using your bank account (at no extra cost to you), go to IRS.gov/Payments. To pay by credit or debit card (for a fee), go to 1040paytax.com.

**Other information:**

Detach the voucher below along the line and mail the voucher with your payment. Do not staple or attach the payment to the voucher.

**Mail-to address:**

Internal Revenue Service  
P.O. Box 1300  
Charlotte, NC 28201-1300

**Taxpayer records:**

Amount paid \_\_\_\_\_  
Check number \_\_\_\_\_  
Date mailed \_\_\_\_\_

(Cut here)

Form 1040-ES (OCR)

**2024**

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0074

**Estimated Tax**

**Payment  
Voucher 2**

Calendar year -  
Due June 17, 2024

- ▶ Make your check or money order payable to "United States Treasury."
- ▶ Enter your SSN and "2024 Form 1040-ES" on your payment.
- ▶ If your name, address, or SSN is incorrect, see instructions.

**Amount of estimated tax you are  
paying by check or money order.**

**1,120**

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

**1024**

SHASHI & PARVATI SINGH  
3309 ARBOR CREEK LN  
FLOWER MOUND, TX 75022

Internal Revenue Service  
P.O. Box 1300  
Charlotte, NC 28201-1300

658440842 W0 SING 30 0 202412 430

2024 Form 1040-ES Estimated Tax Voucher and Filing Instructions  
SHASHI & PARVATI SINGH

**Due date:**

09-16-2024

**Balance due:**

\$1,120

**Transaction method:**

To pay by check or money order, write "2024 Form 1040-ES," your name, address, SSN or ITIN, and daytime phone number on the payment, make it payable to "United States Treasury," and mail to the address below. To pay using your bank account (at no extra cost to you), go to IRS.gov/Payments. To pay by credit or debit card (for a fee), go to 1040paytax.com.

**Other information:**

Detach the voucher below along the line and mail the voucher with your payment. Do not staple or attach the payment to the voucher.

**Mail-to address:**

Internal Revenue Service  
P.O. Box 1300  
Charlotte, NC 28201-1300

**Taxpayer records:**

Amount paid \_\_\_\_\_  
Check number \_\_\_\_\_  
Date mailed \_\_\_\_\_

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Form 1040-ES (OCR)

**2024**

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0074

**Estimated Tax**

Payment  
Voucher **3**

Calendar year -  
Due Sept. 16, 2024

- ▶ Make your check or money order payable to "United States Treasury."
- ▶ Enter your SSN and "2024 Form 1040-ES" on your payment.
- ▶ If your name, address, or SSN is incorrect, see instructions.

Amount of estimated tax you are  
paying by check or money order.

1,120

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

1024

SHASHI & PARVATI SINGH  
3309 ARBOR CREEK LN  
FLOWER MOUND, TX 75022

Internal Revenue Service  
P.O. Box 1300  
Charlotte, NC 28201-1300

658440842 W0 SING 30 0 202412 430

2024 Form 1040-ES Estimated Tax Voucher and Filing Instructions  
SHASHI & PARVATI SINGH

**Due date:**

01-15-2025

**Balance due:**

\$1,120

**Transaction method:**

To pay by check or money order, write "2024 Form 1040-ES," your name, address, SSN or ITIN, and daytime phone number on the payment, make it payable to "United States Treasury," and mail to the address below. To pay using your bank account (at no extra cost to you), go to IRS.gov/Payments. To pay by credit or debit card (for a fee), go to 1040paytax.com.

**Other information:**

Detach the voucher below along the line and mail the voucher with your payment. Do not staple or attach the payment to the voucher.

**Mail-to address:**

Internal Revenue Service  
P.O. Box 1300  
Charlotte, NC 28201-1300

**Taxpayer records:**

Amount paid \_\_\_\_\_  
Check number \_\_\_\_\_  
Date mailed \_\_\_\_\_

(Cut here)

Form 1040-ES (OCR)

**2024**

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0074

**Estimated Tax**

Payment  
Voucher **4**

Calendar year -  
Due Jan. 15, 2025

- ▶ Make your check or money order payable to "United States Treasury."
- ▶ Enter your SSN and "2024 Form 1040-ES" on your payment.
- ▶ If your name, address, or SSN is incorrect, see instructions.

Amount of estimated tax you are  
paying by check or money order.

1,120

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

1024

SHASHI & PARVATI SINGH  
3309 ARBOR CREEK LN  
FLOWER MOUND, TX 75022

Internal Revenue Service  
P.O. Box 1300  
Charlotte, NC 28201-1300

658440842 W0 SING 30 0 202412 430

**2023 Filing Instructions  
SHASHI & PARVATI SINGH**

**Form filed:**

Form 1040 and supplemental forms and schedules

**Filing method:**

Your return will be e-filed once your signed and dated Form 8879 has been received by this office. Do not mail your return to the IRS.

**Due date:**

04-15-2024

**Balance due:**

\$2,644

**Transaction method:**

Your payment will be withdrawn on 04-15-2024 from your BANK OF AMERICA checking account ending in 8259. To cancel this payment, contact the IRS E-file Payment Inquiry and Cancellation Service at (888) 353-4537 no later than two business days before the scheduled payment date.

DRAFT COPY

# ADVANTAGE ONE PARTNERS INC

20610 QUARTERPATH TRACE CIRCLE  
Sterling, VA 20165  
sumit@aotax.com  
Phone: (888)692-6829 | Fax: (000)000-0000

March 11, 2024

Shashi & Parvati Singh  
3309 Arbor Creek Ln  
Flower Mound, TX 75022

Shashi & Parvati Singh:

Below is a summary of your 2023 tax year.

Return Type	Refund/Balance Due	Transaction Method
Federal Income Tax	\$2,644 Balance Due	Direct Debit from **8259

The following returns will be e-filed and do not need to be mailed to the taxing authority:

\* Federal Income Tax

## Federal Income Tax

Quarter	Estimate Due	Due Date	Transaction Method
1st	\$1,120	April 15, 2024	Mail a check
2nd	\$1,120	June 17, 2024	Mail a check
3rd	\$1,120	September 16, 2024	Mail a check
4th	\$1,120	January 15, 2025	Mail a check

Sincerely,

Sumit Panjabi  
ADVANTAGE ONE PARTNERS INC

# ADVANTAGE ONE PARTNERS INC

20610 QUARTERPATH TRACE CIRCLE  
Sterling, VA 20165  
sumit@aotax.com  
Phone: (888)692-6829 | Fax: (000)000-0000

March 11, 2024

Shashi & Parvati Singh  
3309 Arbor Creek Ln  
Flower Mound, TX 75022

Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- \* Interviews regarding your tax situation
- \* Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- \* Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (888)692-6829.

Sincerely,

Sumit Panjabi  
ADVANTAGE ONE PARTNERS INC

# ADVANTAGE ONE PARTNERS INC

20610 QUARTERPATH TRACE CIRCLE

Sterling, VA 20165

sumit@aotax.com

Phone: (888)692-6829 | Fax: (000)000-0000

Customer Name	Customer Information	
Shashi & Parvati Singh 3309 Arbor Creek Ln Flower Mound, TX 75022	Invoice #:	
	Date:	March 11, 2024
	Phone:	(901)656-9836
	E-mail:	SHASHIKS@GMAIL.COM

Your 2023 tax return was prepared by Sumit Panjabi.

Description		Fee
<b>Federal And Supplemental Forms</b>		
Form 1040	U.S. Individual Income Tax Return	
Form 1040ES April	Estimated Tax Voucher 1	
Form 1040ES June	Estimated Tax Voucher 2	
Form 1040ES September	Estimated Tax Voucher 3	
Form 1040ES January	Estimated Tax Voucher 4	
Schedule 1	Additional Income and Adjustments to Income	
Schedule A	Itemized Deductions	
Schedule D	Capital Gains and Losses	
Schedule 8812	Qualifying Children and Other Dependents Credit	
Form 8867	Paid Preparer's Due Diligence Checklist	
Form 8879	E-File Signature Authorization	
Form 8949	Sale and Other Disposition of Capital Assets	
Form 9325	General Information for Electronic Filing	
Form W-2	Wage and Tax Statement	
Fed Withholdings	Form 1040 - Federal Withholding From All Sources	
Tax Computation	Computation of Regular Tax	
Wks 2210	Underpayment Penalty Worksheet	
Wks 8812 - CTC	Schedule 8812 Worksheet - Child Tax Credit	
Wks CG	Qualified Dividends and Capital Gain Tax Worksheet	
Wks D CG AMT	Sched D Capital Gains Worksheet for AMT	
Wks ES	Estimated Tax Worksheet	
Wks Loss	Schedule D Worksheet - Capital Loss Carryover	
Wks STAX	State/Local Sales Tax Deduction Worksheet	
<b>Total Forms</b>	<b>23</b>	<b>Forms Subtotal</b>
		<b>0.00</b>
		<b>Total Balance Due</b>
		<b>0.00</b>

Payment due upon receipt. Thank you for your business!

# ADVANTAGE ONE PARTNERS INC

20610 QUARTERPATH TRACE CIRCLE  
Sterling, VA 20165  
sumit@aotax.com  
Phone: (888)692-6829 | Fax: (000)000-0000

March 11, 2024

Shashi & Parvati Singh  
3309 Arbor Creek Ln  
Flower Mound, TX 75022

Subject: Preparation of Your 2023 Tax Returns

Shashi & Parvati Singh:

Thank you for choosing ADVANTAGE ONE PARTNERS INC to assist you with your 2023 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide.

We will prepare your 2023 federal and state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to the efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Call us if you have concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

Our fee is based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. All accounts not paid within thirty (30) days are subject to interest charges to the extent permitted by state law.

We will return your original records to you at the end of this engagement. Store these records, along with all supporting documents, in a secure location. We retain copies of your records and our work papers from your engagement for up to seven years, after which these documents will be destroyed.

If you have not selected to e-file your returns with our office, you will be solely responsible to file the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them. Our engagement to prepare your 2023 tax returns will conclude with the delivery of the completed returns to you, or with e-filed returns, with your signature and our subsequent submittal of your tax return.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.



Thank you for the opportunity to be of service. If you have any questions, contact our office at (888)692-6829.

Sincerely,

Sumit Panjabi  
ADVANTAGE ONE PARTNERS INC

(Both spouses must sign for preparation of joint returns.)

Accepted By:

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Taxpayer

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Spouse

---

Date